FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

/ashington,	D.C.	20549
vasimigton,	D.O.	20070

heck this box if no longer subject
Section 16. Form 4 or Form 5
bligations may continue. See
actruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Kelly Brian H					FO	2. Issuer Name and Ticker or Trading Symbol FOSTER L B CO [ FSTR ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify							
(Last)	(Fii STER COM	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/26/2024										below) below) EVP HR & Administration					
415 HOLIDAY DRIVE, SUITE 100						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	URGH PA	. 1	5220													X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	(State) (Zip)					Rule 10b5-1(c) Transaction Indication														
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													ended to						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benefic	ially	Own	ed					
1. Title of Security (Instr. 3)  2. Transar Date (Month/Da			Execution Date,						ties Acquired (A) or d Of (D) (Instr. 3, 4 and			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(instr. 4)		
Common Stock 02/26/2					024			F		701	D	\$23	3.4	69,913(1)(2)			D				
Common Stock														531			I	L.B. Foster Company 401(k) Plan Shares			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)				4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo of (D (Insti					7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
				,		v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares								

## **Explanation of Responses:**

1. Includes 5,327 Performance Restricted Stock Units earned under the 2022-2024 Long Term Incentive Plan granted on 02/17/2022; those 5,327 Performance Restricted Stock Units will settle at the end of the 2022-2024 performance period on December 31, 2024, upon certification by the Compensation Committee.

2. Includes 8,522 Performance Restricted Stock Units earned under the 2023-2025 Long Term Incentive Plan granted on 2/14/2023; those 8,522 Performance Restricted Stock Units will settle at the end of the performance period on December 31, 2025, upon certification by the Compensation Committee.

## Remarks:

/s/ Brian H. Kelly by Judith Balog, attorney-in-fact

02/27/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.