### FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

wasnington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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*  VOLTZ DAVID L							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  Officer (client title) Other (cree				ner		
(Last) (First) (Middle) L.B. FOSTER COMPANY 415 HOLIDAY DRIVE					05	3. Date of Earliest Transaction (Month/Day/Year) 05/03/2004										X Officer (give title Other (specify below)  V.P. General Counsel & Sec'y						
(Street) PITTSBURGH PA 15220				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)	City) (State) (Zip)																					
		Tal	ble I - Nor	n-Deriv	vativ	re Se	curi	ties Ad	cquire	d, D	isp	osed of	f, or B	enef	ficially	Owned						
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amour Securitie Beneficia Owned F	s ally ollowing	Form (D) o	: Direct I r Indirect E str. 4) (	7. Nature of Indirect Beneficial Ownership		
									Cod	e V		Amount	(A) (D)	or I	Price	Reported Transacti (Instr. 3 a	tion(s)			(Instr. 4)		
Common Stock 05/03						04			М			10,000	) <i>A</i>		\$3.56	36,	36,416		D			
Common Stock																1,9	970(1)		D			
			Table II -									sed of, onvertib				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
				(	Code	v	(A)	(D)	Date Exercisable			expiration Date			mount umber hares							
Option to Buy	\$4.38								10/23/1	998 <sup>(2)</sup>	1	.0/22/2008	Commo	n 1	5,000		15,000	0	D			
Option to Buy	\$4.44								03/01/2	000 <sup>(3)</sup>	0	2/28/2010	Commo	n 10	0,000		10,000	0	D			
Option to Buy	\$2.75								02/02/2	001 <sup>(4)</sup>	0	)2/01/2011	Commo	n 4	1,000		4,000	)	D			
Option to Buy	\$3.65								05/09/2	001 <sup>(5)</sup>	0	5/08/2011	Commo	n 6	5,000		6,000	)	D			
Option to	\$3.56	05/03/2004			M			10,000	07/24/	1994	0	7/24/2004	Commo	n 10	0,000	\$3.56	0		D			

### Explanation of Responses:

- 1. 401(k)Trust estimate
- 2.25% became vested on 10/23/99 and an additional 25% became vested on each of the next three anniversaries.
- 3.25% became vested on 3/1/01 and an additional 25% becomes vested on each of the next three anniversaries.
- 4.25% became vested on 2/2/02 and an additional 25% becomes vested on each of the next three anniversaries.
- 5. 25% became vested on 5/9/02 and an additional 25% becomes vested on each of the next three anniversaries.

# Remarks:

David L. Voltz

05/03/2004

\*\* Signature of Reporting Person

Date

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

- \* 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.