Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES IN	I BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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* KASEL JOHN F					2. Issuer Name and Ticker or Trading Symbol FOSTER L B CO [FSTR]								(Che	ck all applic Directo	or r (give title		on(s) to Issi 10% Ov Other (s	vner	
(Last) (First) (Middle) L.B. FOSTER COMPANY 415 HOLIDAY DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/17/2014									X below) below) Sr. Vice President					
(Street) PITTSBU (City)	RGH PA	ute) (Z	5220 (ip)	Double	4. If Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment, Date of Original Filed (Month/Day/Year) Control of the Amendment of t							e Repo	orting Persor	1					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		A) or	5. Amount of Securities Beneficially Owned Following		Form (D) o	: Direct I r Indirect I str. 4)	7. Nature of indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)) or)	Price	Reported Transact (Instr. 3 a	ion(s)		ľ	(Instr. 4)
Common S	Stock			03/17/2014					M		1,664	l A		(1)	16,268			D	
Common S	Stock			03/17	/2014				F		688	1	D	\$46.86	15,5	5,580 ⁽²⁾ D			
Common S	Stock														2,2	1 2 220(3)			401(k) Shares
		Ta									osed of, convertil				Owned		,	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	n Date, Transa Code (I			of		6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	0 N 0	amount or lumber of Shares					
Performance Share Units	(1)	03/17/2014			M			1,664	(1)		(1)	Comm	non [1,664	(1)	0		D	

Explanation of Responses:

- 1. Each performance share unit represented a contingent right to receive a share of Issuer common stock based upon the Issuer's performance against certain pre-established financial metrics for the 2011-2013 performance period.
- 2. This number includes restricted shares which were previously awarded to the reporting person by the Issuer under the Issuer's 2006 Omnibus Incentive Plan.
- 3. This number includes 173 shares acquired by the reporting person's 401(k) account as of March 11, 2014.

Remarks:

/s/ John F. Kasel by Deborah J. <u>Foster</u>, <u>attorney-in-fact</u>

03/19/2014

** 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.