FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, E	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPF	ROVAL								
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* <u>Treacy William</u>					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 (give title Other (specify							
(Last) (First) (Middle) L.B. FOSTER COMPANY					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2024									X Officer (give title below) Other (spelow) EVP & Chief Growth Officer							
415 HOLIDAY DR., 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												X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)					Rul	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.																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Inst 5)						Form	: Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
									Code	v	Amount	(A) o (D)	Price	Tr	ansac	tion(s) and 4)			(111501.4)		
Common Stock 02/17.				02/17/2	2024			F		611	D	\$2	24 33,		575(1)(2)		D				
Common Stock															7,	000		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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any Code				5. Number action of			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	de V (A) (D)		(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares								

Explanation of Responses:

1. Includes 3,621 Performance Restricted Stock Units earned under the 2022-2024 Long Term Incentive Plan granted on 02/17/2022; those 3,621 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 7,101 Performance Restricted Stock Units earned under the 2023-2025 Long Term Incentive Plan granted on 2/14/2023; those 7,101 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/ William Treacy by Judith Balog, attorney-in-fact

02/21/2024

** 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.