## Edgar Filing: FOSTER L B CO - Form 4

FOSTER L B CO Form 4 March 17, 2015 <ul> <li>March 17, 2015             <li>MINTED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549</li> <li>Check this box if no longer subject to Section 16.             <li>MB</li> <li>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP</li> <li>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1935, of the Investment Company Act of 1935 or Section</li> <li>Filed pursuant to Section 16(a) of the Investment Company Act of 1935 or Section</li> <li>Simate J = 10000000000000000000000000000000000</li></li></li></ul>							
(Print or Type Responses)							
1. Name and Address of Reporting Person <u>*</u> RUSSO DAVID J	2. Issuer Name and Symbol FOSTER L B CO		Ig	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) L.B. FOSTER COMPANY, 415 HOLIDAY DRIVE	<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>03/13/2015</li></ul>			Director 10% Owner X Officer (give title Other (specify below) below) Sr. V.P., CFO & Treasurer			
(Street) PITTSBURGH, PA 15220	4. If Amendment, Dat Filed(Month/Day/Year)	-		<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>			
(City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>							
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Dee Execution any (Month/1.Title of Security (Month/Day/Year)2. Transaction Date Execution any (Month/	on Date, if Transactio Code /Day/Year) (Instr. 8)	4. Securities Ador(A) or Disposed (D) (Instr. 3, 4 and (A) or Amount (D)	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common 03/13/2015 Stock	A	Amount (D) 1,509 (3) A	\$ 0	31,539 <u>(1)</u>	D		
Common 03/15/2015 Stock	F	314 D	\$ 44.9	31,225 <u>(1)</u>	D		
Common Stock				1,508 <u>(2)</u>	Ι	401(k) Shares	

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

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#### number.

# 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 (Month/Day/Y	Year) H	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	of	5	Date	Amou Under Secur	tle and unt of rrlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owners												
Reporting Ov	Owner Name	e / Address			Relationshi	ips						
		D	Director	10% Owner C	Officer		(	Other				
415 HOL	DAVID J TER COMF IDAY DRIV JRGH, PA 1	VE			Sr. V.P., 0	CFO & T	reasurer					

## Signatures

/s/ David J. Russo by Deborah J. Foster, attorney-in-fact	03/17/2015
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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).
- (1) This number includes restricted shares which were previously awarded to the reporting person by the Issuer under the Issuer's 2006 Omnibus Incentive Plan.
- (2) This number includes 1 share acquired by the reporting person's 401(k) account as of March 16, 2015.
- (3) Award of time vested restricted stock, which will vest 33 1/3% on each of the first, second, and third anniversaries of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.