FOSTER L B CO

Form 4

November 07, 2007

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

**OMB APPROVAL** 

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

0.5

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

burden hours per response...

Estimated average

See Instruction

1(b).

30(h) of the Investment Company Act of 1940

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* RUSSO DAVID J

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Middle)

FOSTER L B CO [FSTR]

(Check all applicable)

(Street)

(First)

L.B. FOSTER COMPANY, 415

3. Date of Earliest Transaction

(Month/Day/Year)

Director 10% Owner Other (specify \_X\_\_ Officer (give title

11/06/2007

below) Sr. V.P., CFO & Treasurer

**HOLIDAY DRIVE** 

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line) \_X\_ Form filed by One Reporting Person

Form filed by More than One Reporting

Person

PITTSBURGH, PA 15220

(City)	(State)	(Zip) Ta	ble I - Non	-Derivativ	e Seci	ırities Acqu	ired, Disposed of	, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	, ,			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/06/2007		Code V M	Amount 10,000	(D)	Price \$ 4.1	13,200	D	
Common Stock	11/06/2007		S	10,000	D	\$ 42.7888	3,200	D	
Common Stock	11/06/2007		M	5,000	A	\$ 4.1	8,200	D	
Common Stock	11/06/2007		S	5,000	D	\$ 43.3992	3,200	D	
Common Stock							751	I	401(k) Trust Share Equivalents

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

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 control number.

SEC 1474 (9-02)

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. Transactic Code (Instr. 8)	orDeriva Securi Acquii	ities red (A) sposed of 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Option to Buy	\$ 4.3						07/26/2002(1)	07/25/2012	Common	10,000
Option to Buy	\$ 4.1	11/06/2007		M		10,000	12/10/2002(2)	12/09/2012	Common	10,000
Option to Buy	\$ 4.1	11/06/2007		M		5,000	12/10/2002	12/09/2012	Common	5,000

# **Reporting Owners**

Reporting Owner Name / Address		Relationships	

Director 10% Owner Officer Other

RUSSO DAVID J L.B. FOSTER COMPANY 415 HOLIDAY DRIVE PITTSBURGH, PA 15220

Sr. V.P., CFO & Treasurer

## **Signatures**

David J. Russo 11/07/2007

\*\*Signature of 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) 25% became vested on 7/26/03 and additional 25% becamevested on each of the next three anniversaries.
- (2) 25% became vested on 12/10/03 and an additional 25% became vested on each of the next three anniversaries.
- (3) Intentionally left blank

Reporting Owners 2

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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.