FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| ĺ | OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
|   | OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
|   | Estimated average burden |           |  |  |  |  |  |  |  |  |
| ı | hours per response       | : 0.5     |  |  |  |  |  |  |  |  |

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person*     Leenen Bob Willem  |  |       |        |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol MSA Safety Inc [ MSA ] |  |   |                                    |  |     |                    |  | neck all ap<br>Dired                                | plicable)<br>ctor  | ing Person(s) to  |  | )wner  |                            |   |
|--|--|-------|--------|---|---|--|---|------------------------------------|--|-----|--------------------|--|---|--|---|--|--|----------------------------|---|
| (Last)<br>1000 CR  | (Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE   |       |        |   |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023 |                                    |  |     |                    |  |   |  |   | Officer (give title below)  Vice I             |  | Other (s<br>below)<br>lent | sресіту — — — — — — — — — — — — — — — — — — —                     |
| (Street) CRANBERRY WOODS PA 16066 TOWNSHIP                   |  |       |        | 4. If Amendment, Date of Original Filed (Month/Day/Year)  Rule 10b5-1(c) Transaction Indication |   |  |   |                                    |  |     | Lin                | Individual or Joint/Group Filing (Check Applicable lee)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |  |   |  |  |                            |   |
| (City)   | (City) (State) (Zip)   |       |        |   |   | 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 | l - No | n-Deriva  | tive S  | ecur   | rities  | Acq                                | uired,   | Dis | osed of            | f, or  | Ben   | efici  | ally Owi  | ned  |  |                            |   |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day |  |       |        |   | Executi<br>y/Year) if any   |  | Deemed<br>cution Date,<br>y<br>nth/Day/Year)                |                                    | 3.<br>Transaction<br>Code (Instr. Disposed<br>and 5) |     |                    |  |   |  | 5. Amo<br>Securi<br>Benefi<br>Owned                         | icially<br>d                                   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |                            | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |       |        |   |   |  |   |                                    | Code   | v   | Amount             | (A<br>(D   | ) or  | Price  | Transa  | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |  |                            |   |
| Common Stock, no par value 06/09/2                           |  |       |        |   |   | 2023   |   |                                    | S  |     | 565                | D \$1  |   | \$15   | 50 9,417  |  | 7 D  |                            |   |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |       |        |   |   |  |   |                                    |  |     |                    |  |   |  |   |  |  |                            |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)          | tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any   |       |        | Transaction Code (Instr. 8)   |   | 5.<br>Numl<br>of<br>Deriv<br>Secu<br>Acqu<br>(A) o<br>Dispo<br>of (D)<br>(Instrand 5   | rative<br>rities<br>iired<br>r<br>osed<br>)                 | 6. Date E<br>Expiratio<br>(Month/E | on Da  |     |                    | d 4)   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Ownersh<br>Form:<br>Direct (D<br>or Indirect<br>(I) (Instr. | Ownership                                      | Beneficial<br>Ownership<br>tt (Instr. 4)                             |                            |   |
|  |  |       |        |   | Code V  |  | (A)   | (D)                                |  |     | Expiration<br>Date | Title  | or<br>Nun<br>of<br>Sha                              | .  |   |  |  |                            |   |

**Explanation of Responses:** 

Stephanie L. Sciullo, Attorney o6/09/2023 in fact

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.