FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFI	CIAL OWNERSH	I

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burd	en								
l	hours per response:	0.5								

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

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* <u>Killeen Randall</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  MSA Safety Inc [ MSA ]									Check	all app		10	to Issue % Owne	er	
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/12/2016									X	belov	Officer (give title below)  Chief Accounting Officer			Sury	
(Street) CRANBI WOODS TOWNSI (City)	HIP PA		.6066 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Indivi ne) X	Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson					
		Tabl	e I - Non-	-Deriva	ative	Se	curitie	s Ac	quire	d, Dis	posed o	f, or	Bene	eficia	ally C	Owne	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			Execution pay/Year) if any		cution Date,		Transaction Disposed Code (Instr. 5)		ities Acquired (A d Of (D) (Instr. 3,			nd	5. Amount of Securities Beneficially Owned Following Reported		6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	of I ct Ber Ow	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Cod	le V	Amount		(A) or (D)	Price	, l	Transa	ction(s) 3 and 4)		lins	Str. 4)
Common Stock, no par value 08/12/					/2016			F		1,176	6	D	\$55		7,357		D			
		Та	ble II - De (e.								osed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,	4. Transaction Code (Instr. 8)				Expira	Exercition Da		Amount of		str. 3	8. Price Derivat Securit (Instr. 5		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	nip of I Bei O) Ow ct (Ins	Nature Indirect eneficial wnership estr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Nun of	ount nber res						

**Explanation of Responses:** 

Douglas K. McClaine, **Attorney** in Fact

08/16/2016

Date

\*\* Signature of Reporting Person

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.