FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Birgersson Joakim</u>						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]									Check all	ship of Reporti applicable) irector fficer (give title		10% O	
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2017										X Officer (give title Other (specify below) Vice President				
(Street) CRANBERRY WOODS PA 16066 TOWNSHIP (City) (State) (Zip)				4. If	Amer	ndment,	, Date o	f Origina	l Filed	d (Month/Da	ay/Yea	r)		ne) <mark>X</mark> F F	al or Joint/Grou orm filed by Or orm filed by Me erson	ne Rep	porting Pers	on	
		Tabl	e I - No	n-Deriva	ative	Sec	uritie	s Acc	quired,	, Dis	posed o	f, or	Ben	eficia	ally Ov	/ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Ex r) if a	A. Deemed kecution Date, any lonth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			(A) or 3, 4 an	d 5) Se Be Ov	Amount of curities neficially ned Following ported	For (D)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A (D) or))	Price	Tra	ported insaction(s) str. 3 and 4)			(Instr. 4)
Common Stock, no par value 02/28/2					2017	:017			A		757		A	\$0.0	000	7,035		D	
		Та									osed of, onvertib				y Own	ed	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		te	7. Title and Amount of Securities Underlying Derivative Security (Insti and 4)			8. Price Derivati Security (Instr. 5)	derivative Securities	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	nount mber ares					

Explanation of Responses:

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

03/02/2017

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.