FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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* Blanco Steven C. Sr.						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]									(Check all a Dir V Of		licable) tor er (give title	g Person(s) to Iss 10% Ow Other (s		wner (specify
						3. Date of Earliest Transaction (Month/Day/Year) 03/08/2019										belov	Vice P	reside	below) nt	
(Street) CRANBERRY WOODS PA 16066 TOWNSHIP (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individine)					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					4 and 5) See Be Ow		curities I neficially (nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount (A) (C)			Price	Tran		action(s) 3 and 4)			(111511.4)			
Common Stock, no par value 03/08/2						2019		A		5,424		A	\$0.0	\$0.0000		18,155		D		
Common Stock, no par value 03/08/2					2019	2019		F		326		D	\$102.27		7 17,829			D		
Common Stock, no par value 03/08/2					2019			F		1,545	,545 D \$1		\$102	2.27 16,2		6,284		D		
		Та	ble II -	Derivati (e.g., pເ	ve Se its, ca	ecur alls,	ities warr	Acqu ants,	ired, D option	ispo is, c	sed of, onvertib	or Bo	enef ecuri	iciall ties)	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. Deem Execution if any (Month/D	n Date,	4. Transac Code (I 8)		of		6. Date E Expiratio (Month/D	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ov Fo Dir or (I)	vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	or Nu of	ount mber ares						

Explanation of Responses:

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

03/12/2019

** Signature of Reporting Person Date

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.