FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.O. 20040

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

					or S	ection	30(h) of	f the Ir	nvestme	nt Cor	mpany Act o	of 1940	)							
1. Name and Address of Reporting Person*  BRUGGEWORTH ROBERT A					2. Issuer Name <b>and</b> Ticker or Trading Symbol  MSA Safety Inc [ MSA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DICOGC	JL W OIC	III KODLKI	<u>/1</u>												X Dii	ector		10% C	wner	
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 05/13/2016											Officer (give title below)		Other (specify below)			
(Street) CRANBI WOODS TOWNSI	PA HIP		16066 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)										ne) <mark>X</mark> Fo	rm filed by One	t/Group Filing (Check Applicable by One Reporting Person by More than One Reporting			
		Tabl	e I - No	n-Deriva	ative	Secu	urities	Acq	uired,	Dis	posed o	f, or	Ben	eficia	ally Ow	ned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execut ay/Year) if any		Deemed cution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d 5) Sec Ben Owi	Securities Beneficially		ership Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D) Pri		Price	Trai	Transaction(s) (Instr. 3 and 4)			(111511.4)	
Common Stock, no par value 05/13/2					3/2016				A 2,094			A	\$0.00	000 1	5,995.595	I	)			
		Та									sed of, o				y Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		1. Transaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		nstr. 3	8. Price o Derivative Security (Instr. 5)		Owi For Dire or Ii (I) (I	nership m: ect (D) ndirect nstr. 4)	Beneficial Ownership (Instr. 4)	
													or	mbor		1				

Explanation of Responses:

Douglas K. McClaine, Attorney in Fact

of Shares

Title

Expiration Date

Date Exercisable

05/17/2016

\*\* 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.