Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* PEARSE DIANE M						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]										k all app Direc	licable) tor	ng Pei	rson(s) to Is	vner
(Last) 1000 CR	`	First)	(N DDS DRIV	/iddle)			3. Date of Earliest Transaction (Month/Day/Year) 05/24/2021									Office	er (give title		Other (s below)	specify
(Street) CRANB: WOODS TOWNS (City)	HIP	PA State)		5066 (ip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Indi Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	l, Dis	posed of	, or B	Benefic	ially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				/Year) Executi		ution Date,		Transaction Disposed C		es Acquired (A) Of (D) (Instr. 3, 4		and Securit		ies cially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount	(A) or (D)	Price			ction(s)			(111341. 4)
Common Stock, no par value 05/24/2			05/24/20	021			A		789	A	\$0.0	000	34,667.2691			D				
			Tak	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of	ired r osed) : 3, 4	Expiration De (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
						Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

Stephanie L. Sciullo, Attorney 05/25/2021

in fact

** 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.