FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C	20549
vasilington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	. 0.5							

	tion 1(b).	inde. See		Filed	pursua or Se	ant to S ection 3	ection 80(h) o	16(a) f the li	of the S	Securitent Co	ties Exchang mpany Act o	e Act o	f 1934		nours	s per re	esponse:	0.5
1. Name and Address of Reporting Person* Roberts Rebecca B					2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]								Relationsh Check all ap X Dire	'	ng Pei	rson(s) to Is		
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 05/18/2022									Officer (give title below)		Other (s	specify		
(Street) CRANBI WOODS TOWNS (City)	HIP		6066 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Fori Fori	ual 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	Acq	uired	, Dis	posed of	, or B	enefic	ally Ow	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				-	Execution Date,		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			nd Secu Bene Owne	Securities Fo Seneficially (D)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Trans				(111511. 4)	
Common Stock, no par value 05/18/2				.022		A		1,129	A	\$0.00	000 12,038			D				
		Tal	ble II -								osed of, convertib				ed			
1. Title of Derivative Security (Instr. 3) Price of Derivativ Security		xercise (Month/Day/Year) e of vative		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			e and nt of ities lying tive tity (Instr. 4)	8. Price of Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Number of Shares					

Explanation of Responses:

Stephanie L. Sciullo, Attorney 05/20/2022

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.