FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

<i>N</i> ashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response.	0.5						

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											ll.	Estimated average burden hours per response:				
1. Name and Address of Reporting Person* Roberts Rebecca B					2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]							heck all app	licable) tor	10% Owner		
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 05/24/2021						Office belov	er (give title v)		Other (specify below)			
(Street) CRANBERRY WOODS PA 16066 TOWNSHIP				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (2	Zip)													
		Table	I - Non-Deriva	ative S	Secur	rities Acc	uired	, Dis	posed of	, or Be	nefici	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Date,				Disposed Of	es Acquired (A) Of (D) (Instr. 3, 4		d Securi Benefi	cially I Following	Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) or (D)	Price	Transa	ction(s) 3 and 4)			(111511. 4)
Common Stock, no par value 05/24/2					.021		A		789	A	\$0.00	000 1	11,754		D	
		Tal	ole II - Derivat (e.g., p						osed of, convertib				d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4	6. Date Expira (Month	tion D		7. Title a Amount Securitie Underly Derivatin Security 3 and 4)	of es ing /e (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownershi (Instr. 4)

Explanation of Responses:

Stephanie L. Sciullo, Attorney 05/25/2021

Amount or Number

Shares

in fact

Title

Expiration Date

** 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).

Code

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.

and 5)

(A) (D) Date

Exercisable