FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OMB APPROVAL								
	OMB Number:	3235-0287							
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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

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1. Name and Address of Reporting Person* Weber Markus H						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
TTCDCI	VICITICO I	-															er (give title			specify	
(Loot)	(E:	wat) /	Middle		_									_	X	belov			below)		
(Last)	•	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year)									Vice President						
1000 CRANBERRY WOODS DRIVE					03/	05/31/2017															
(Street)				4. If	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
	CRANBERRY]										Line)					
WOODS															X	Form filed by One Reporting Person				on	
TOWNSI																Form Pers	n filed by Mor on	e than O	ne Rep	orting	
(City)	(St	ate) (Zip)																		
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Ac	quired	, Dis	posed o	f, or	Ber	efici	ally O	wne	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Executio		n Date,				ties Acquired (A) d Of (D) (Instr. 3, 4			and 5) See Be Ow		ecurities eneficially		rship irect direct 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		A) or O)	Price	1	Transa	action(s) 3 and 4)			(111501.4)	
Common Stock, no par value 05/31/2					/2017	2017		A		500		A	\$0.0	000	16,259		D				
Common Stock, no par value 05/31/2					/2017	2017			F		158		D	\$81	l.1	16,101		D			
		Та									osed of, onvertib					ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	ate, Transact Code (In				6. Date Expirati (Month/	on Da		Amount of Securities Underlying Derivative Security (Instr. and 4)		J	8. Pric Deriva Securi (Instr.	itive ity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Own Forn Dire or In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	mber ares							

Explanation of Responses:

<u>Douglas K. McClaine,</u> <u>Attorney in Fact</u>

08/22/2017

** Signature of Reporting Person Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

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.

 $^{^{\}star}$ 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).