FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Wash	nington,	D.C.	20549	

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

## NT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Buck Jonathan D.				2. Issuer Name and Ticker or Trading Symbol  MSA Safety Inc [ MSA ]								(Che	eck all app Direc	ationship of Reporting all applicable) Director Officer (give title		rson(s) to Is 10% Ov Other (s	vner		
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 03/08/2020								- '	belov			below)				
(Street) CRANB WOODS TOWNS (City)	HIP		6066 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acqu Disposed Of (D) (In					Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A) (D)	(A) or (D) Pr		Transa	Transaction(s) (Instr. 3 and 4)			(3 4)	
Common Stock, no par value 03/08			03/08/2	2020		F		43	Г	)	\$1 <mark>29</mark> .	9.4 1,741			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)				Transaction of Code (Instr. Deriv		rities iired r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		estr.	3. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Num of Shai						

**Explanation of Responses:** 

Stephanie L. Sciullo, Attorney 03/10/2020

in fact

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

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.