FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number: 3235-0287			
OTATEMENT OF OTHER DEVICE TOTAL OWNERS IN	Estimated average b	urdon		

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 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Address of Reporting Person*  RYAN JOHN T III					2. Issuer Name and Ticker or Trading Symbol  MSA Safety Inc [ MSA ]										Officer (give title		10% Ov Other (s		wner
(Last) (First) (Middle)  1000 CRANBERRY WOODS DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 05/12/2020										below	/)		below)	
(Street) CRANB: WOODS TOWNS	S PA	Δ 1	6066		4. If A	. If Amendment, Date of Original Filed (Month/Day/Year)								. Indi ine) X	′				
(City)	(St	tate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	l, Dis	posed of	, or Be	enefic	ially	/ Own	ed			
Date			2. Transacti Date (Month/Day	Execution		tion D	ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			and Securit		ies ially 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		Transac (Instr. 3	tion(s)			, ,
Common Stock, no par value 05/12/				05/12/2	020	)20			G	V	1,600	D	\$0.00	000	0 1,000,596			D	
Common Stock, no par value 05/12/2				)20				G	V	4,126	D	\$0.00	242,825		2,825		I	By Wife	
Common Stock, no par value														734,641				Co- Trustee <sup>(1)</sup>	
		Tal	ole II								osed of, convertib				Owne	t			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, Tran- urity or Exercise (Month/Day/Year) if any Code				Transa Code (	nsaction of De Se Ac (A) Dis of		osed ) r. 3, 4	6. Date Expira (Monti	tion D	Year) Secur Unde Deriv		nt of Dities Slying (I		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date		Amount or Number of Shares						

## **Explanation of Responses:**

1. Shares held in trusts of which I am a trustee and in which I and members of my immediate family are among the beneficiaries.

Stephanie L. Sciullo, Attorney

05/12/2020

\*\* 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.