FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	JVAL					
OMB Number:	3235-0287					
Estimated average burd	en					
hours per response:	0.5					

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

1. Name and Address of Reporting Person* Sciullo Stephanie L							2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]										all app	p of Reportin blicable) ctor er (give title	ng Pers	10% C	
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 03/02/2020										X	belov				
(Street) CRANBERRY WOODS PA TOWNSHIP (City) (State)			.6066 Zip)				Line) X Form filed by									n filed by One	oup Filing (Check Applicable One Reporting Person More than One Reporting				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date					Date Execution (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			4 and Se Be Ow		Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
										ode V		Amount		(A) or (D)	Price	,	Transa	ansaction(s) str. 3 and 4)			(Instr. 4)
Common Stock, no par value 03/02/)				S		3,085		D	D \$12		2,543			D	
		Та	ble II - D									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date, Transaction Code (Ins.					Expi	ate Exer piration D onth/Day/	ate		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)			Deri Sec	Price of ivative curity etr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)) D (I	O. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code V		v	(A)	(D)	Date Exe	e Expiration rcisable Date Title Amou			mber										

Explanation of Responses:

Stephanie L. Sciullo

03/03/2020

** 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.