FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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* BRUGGEWORTH ROBERT A						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]										all applicable) Director		ng Persor	Person(s) to Issuer	
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 05/22/2017										Office below	er (give title w)		Other (specify below)	
(Street) CRANBERRY WOODS PA 16066 TOWNSHIP (City) (State) (Zip)				4. If	Ame	ndment	, Date c	of Origina	al Filed	d (Month/Da	ay/Ye	ear)		i. Indivi ine) X	Form	r Joint/Group n filed by One n filed by Mor on	e Reporti	ng Pers	on	
		Tab	le I - No	n-Deriv	ative	Sec	curitie	s Ac	quired	, Dis	sposed o	f, o	r Ber	efici	ally C	Owne	ed			
Date					e Ex nth/Day/Year) if a		A. Deemed kecution Date, any lonth/Day/Year)					curities Acquired (A) sed Of (D) (Instr. 3, 4			and 5) Secur Benef		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price	- 1	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock, no par value 05/22/2						/2017					1,506		A	\$0.0000		00 19,241.595		Γ)	
		Та									osed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security		3A. Deem Execution if any (Month/D	n Date,		ransaction ode (Instr.		of		6. Date Exercisa Expiration Date (Month/Day/Yea		Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Prid Derive Secur (Instr.	vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Titl	or Nu of	mber ares						

Explanation of Responses:

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

05/23/2017

** 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.