FORM 4

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

W	as	hin	gton	, D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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* <u>LAMBERT WILLIAM M</u>					2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [ MSA ]									all app Direc	er (give title		10% O	wner	
(Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 05/18/2022									Office below	Other ( below)			specify		
(Street) CRANBERRY WOODS PA 16066 TOWNSHIP				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	idual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(51		Zip)	n Darius	41112			A		Die		P	onofi	الداد	. O				
Table I - Non-Derivat  1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/				on 2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or 5. Amount of		ount of ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect t Beneficial Ownership			
								Code	v	Amount	(A) o	r Pric	е	Transa	saction(s) : 3 and 4)			(Instr. 4)	
Common	Stock, no p	oar value		05/18/2	022			A		1,129	A	\$0.	0000	42	42,869		D		
Common Stock, no par value															5	1,000			By GRAT (Wife)
Common Stock, no par value															1	1,100		I	By Wife
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)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) if any (Month/Day/Year) ive		Transa Code (		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instrand 5	rities ired r osed )	6. Date Expirar (Month	tion Day/\			Der Sec (Ins	Price of ivative urity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

**Explanation of Responses:** 

Stephanie L. Sciullo, Attorney 05/20/2022 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.