FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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		,				припу лег			_						
Name and Address of Reporting Person* Savi Luca						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SUVIL	<u> </u>	•								\dashv X	Direc	tor 10%		10% Ov	vner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/10/2023									Office	er (give title v)		Other (s below)	specify	
1000 CR	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)										
(Ctroot)										l x	X Form filed by One Reporting Person									
(Street) CRANB WOODS	RANBERRY					l l										by More than One Reporting				
TOWNS					Rule 10b5-1(c) Transaction Indication															
(City)	(S	tate) (Z	Zip)			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ended to				
		Table	I - No	n-Derivat	tive S	ecui	rities	Acc	quired,	Dis	posed of	f, or	Ben	eficial	ly Owr	ned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N					Execution Date,			ate,	3. Transaction Code (Instr. 8) 4. Securities Acq Disposed Of (D) (5)				Acquired (A) or (D) (Instr. 3, 4 and		Beneficially Owned Following		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) Price		Reported Transaction(s) (Instr. 3 and 4)									
Common	023				A		5.678	A	.	\$0.0000	2,758.0165		I	D						
		Tab	ole II	Derivativ (e.g., put											Owne	d				
1. Title of Derivative Security (Instr. 3)	ive Conversion Date y or Exercise (Month/Day/Year) Execution Date, if any			4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative irities uired or osed) r. 3, 4	6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		f De Se g (Ir	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Di	D. wnership orm: irect (D) r Indirect) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code		v	(A)	(D)	Date Expiration Date		Title	or Nur of	ount mber ures							

Explanation of Responses:

Stephanie L. Sciullo, Attorney in fact 06/13/2023

** 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.