FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden

0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 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. Name and Address of Reporting Person* <u>Vartanian Nishan J.</u>					2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 1000 CR	•	rirst) (I Y WOODS DRIV	Middle) VE		3. Date of Earliest Transaction (Month/Day/Year) 03/08/2024									X	Office below	er (give title v) CEO / (X Chair	below)	specify
(Street) CRANBERRY WOODS PA 16066 TOWNSHIP			4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	,						
(City)	(\$		Zip)			Check to satisfy the	nis box ne affiri	to indi	cate that defense	a tran condit	saction Indi	ade pur 0b5-1(c)	suant to . See Ins	structio	n 10.		en pla	an that is inter	nded to
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)			ion 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			red (A)	5. Amount of 4 and Securities Beneficially Owned Followir		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) o	Pric	e		erted saction(s) c. 3 and 4)			(Instr. 4)
Common Stock, no par value 03/08/2				024		A		35,446	A	\$0.	0000	000 87,315		D					
Common Stock, no par value 03/08/2			024		F		14,609	D	\$18	35.92	72,706		D						
Common Stock, no par value													1,190			I	By Wife		
		Tal	ble II								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any		tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	tion D	ate Amou (ear) Securi Under Deriva Securi		mount of [Price of rivative curity str. 5)		Owner Form Direct or Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Number of Shares							

Explanation of Responses:

Richard W. Roda, Attorney in 03/12/2024

Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).