FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APP	ROVAL
	OMB Number:	3235-028

87 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

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1. Name and Address of Reporting Person* LAMBERT WILLIAM M						2. Issuer Name and Ticker or Trading Symbol MSA Safety Inc [MSA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
LAWIDERT WILLIAWI WI						<u> </u>									X Dire		ctor		L0% C	wner
(Last) (First) (Middle)																Officer (give title below)			Other (specify below)	
1000 CRANBERRY WOODS DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 09/08/2014									President and CEO					
,																				
(Street) CRANBERRY					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
WOODS	WOODS PA 16066														X	Form	rm filed by One Reporting Person			
TOWNS	TOWNSHIP															Form filed by More than One Reporting Person				orting
(City)	(St	ate) (Zip)																	
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	es Ac	quire	l, Dis	sposed o	f, or	Ben	efici	ally O	wne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,						ies Acquired (A) o Of (D) (Instr. 3, 4			l and 5) Sec Ben Owi		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount	(A (D) or))	Price	1	Reported Transaction(s) (Instr. 3 and 4)				(111341.4)		
Common	Stock, no p	/2014	2014		G	V	4,000		D	\$0.0	000	0 138,067		D						
Common	Stock, no p											60,600		I		By Wife				
		Та									osed of, convertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	Date, Trans					6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instrant 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nu of	nount mber ares						

Explanation of Responses:

Douglas K. McClaine, **Attorney in Fact**

09/08/2014

** 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.

^{*} 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).