FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

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STATEMENT OF CHA	NGES IN BENEFIC	IAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
	Estimated average burd	en				
	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* RYAN JOHN T III						2. Issuer Name and Ticker or Trading Symbol MINE SAFETY APPLIANCES CO [MSA]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director X 10% Own				vner	
	(Fi MMA DRIV IDUSTRIA	νE	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/14/2010								X Officer (give title below) Other (specify below) Chairman						
,	URGH PA		15238		4. If Amendment, Date of C				of Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date,		3. Transa	3. Transaction Code (Instr.		4. Securities Acquired (A)			or 5. Amou Securitie Benefici Owned I		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) d	r Price	, т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, no par value			05/1	14/2010				A		1,76	1,764 A		0	1,025,932			D		
Common Stock, no par value														1,521,889				As Co- Trustee ⁽¹⁾	
Common Stock, no par value														354,731				By Wife ⁽²⁾	
Common Stock, no par value														160,357			I	By Wife as Trustee ⁽³⁾	
Common Stock, no par value															474,156				Co- Trustee ⁽⁴⁾
		Т	able II -									, or Ben ble sec			ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	ed Date,	4. Transa Code (8)	action	5. Nun	6. Date Ex	5. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities (Underlying Derivative Secu (Instr. 3 and 4)			d f s g Security	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		kpiration ate	Title	Amount or Number of Shares	1					
Non- statutory Stock Option	\$29.33	05/14/2010			A		3,715		05/14/201	3 05	5/14/2020	Common Stock, no par value	3,715		\$0	3,715		D	

Explanation of Responses:

- 1. Shares held in a trust of which I am a Trustee and in which a member of my immediate family is the beneficiary. I disclaim beneficial ownership of these shares.
- 2. I disclaim beneficial ownership of these shares.
- 3. Shares held in trusts of which I am not a trustee and in which members of my immediate family are beneficiaries. I disclaim beneficial ownership of these shares.
- 4. Shares held in trusts of which I am a trustee and in which I and members of my immediate family are among the beneficiaries.

Remarks:

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

05/18/2010

** 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.