FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANG | ES IN BE | NEFICIAL | OWNERS | HIP |
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| 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* HERRING RONALD N JR | | | | | 2. Issuer Name and Ticker or Trading Symbol MINE SAFETY APPLIANCES CO [MSA] | | | | | | | | | all application of the contraction of the contracti | or 1 (give title 0 | | 10% Ow Other (s | 10% Owner Other (specify | |
|---|---|--|---|-----------------|---|--------------|---|---------------------|--|--------|--------------------------|--|-----------------------------------|--|--|--|---|--|--|
| (Last) (First) (Middle) 1000 CRANBERRY WOODS DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/05/2012 | | | | | | | | | below) | Presi | ident | below) | | |
| (Street) CRANBERRY TOWNSHIP PA | | | | 4.1 | 4. If Amendment, Date 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) | (S | tate) | (Zip) | | | | | | | | | | | | | - | | | |
| | | Tab | le I - 1 | Non-Deri | vative | Sec | urities | s Ac | quire | d, D | isposed o | of, or B | enefic | ially | Owned | l . | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | Benefic Owned | | es ially Following | 6. Own Form: I (D) or I (I) (Inst | Direct Claudirect Etr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) | | | |
| Common Stock, no par value 11/05/2 | | | 012 | 2 | | M | | 3,989 | A | \$25.0 | .065 | | 6,062 | | D | | | | |
| Common Stock, no par value 11/05/202 | | | | 012 | 2 | | F | | 2,624 | D | \$38. | .99 | 33 | 3,438 | | D | | | |
| Common Stock, no par value 11/06/202 | | | | 012 | 2 | | M | | 9,860 | A | \$25.0 | 065 43 | | 3,298 | | D | | | |
| Common Stock, no par value 11/06/202 | | | | 012 | 12 | | S | | 9,860 | D | \$39.18 | 1895(1) 33 | | 3,438 | | D | | | |
| | | Т | able | | | | | | | | sposed of, , converti | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | 5. Number of | | tive ties red | 6. Date Exerc Expiration D (Month/Day/\) | | cisable and | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. De Se | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y D o (i | 0. Ownership Form: Direct (D) or Indirect () (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) (I | D) | Date Exercis | sable | Expiration Date | Title | Amou or Numb of Share | er | | | | | |
| Incentive Stock Option | \$25.065 | 11/05/2012 | | | M | | 3 | ,989 | 03/09/ | 2005 | 03/09/2014 | Commor Stock, no par value | 3,98 | 9 \$ | 25.065 | 0.0000 | | D | |
| Non- statutory Stock Option | \$25.065 | 11/06/2012 | | | M | | 9 | ,860 | 03/09/ | 2005 | 03/09/2014 | Commor Stock, no par value | 9,86 | 0 \$ | 25.065 | 0.0000 | | D | |

Explanation of Responses:

1. Sale price on this transaction ranged from \$39.17 to \$39.36.

Douglas K. McClaine, 11/06/2012 Attorney in Fact

** 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.