FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average burden										

1.0

hours per response:

Form 3 Holdings Reported.

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 Form 4 Transactions Reported.

1. Name and Address of Reporting Person* <u>SHAW L EDWARD JR</u>			2. Issuer Name and Ticker or Trading Symbol MINE SAFETY APPLIANCES CO [MSA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				X	Director	10% Owner		
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007		Officer (give title below)	Other (specify below)		
9 CARRIAGE HOUSE LANE								
(Street) MAMARC	ONECK NY	10543-1005	4. If Amendment, Date of Original Filed (Month/Day/Year) 02/06/2008		vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)						

		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially	6. Ownership Form: Direct	7. Nature of Indirect Beneficial Ownership					
	(MOHUI/Day/Teal)	6)	Amount	(A) or (D)	Price	Issuer's Fiscal Year (Instr. 3 and 4)	Indirect (I) (Instr. 4)	(Instr. 4)					
12/12/2007		G	900	D	\$0	186,026	I	Jointly with Wife					
						20,331	D						
	(Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8)	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Amount	(Month/Day/Year) if any (Month/Day/Year) 8) Code (Instr. 8) Amount (A) or (D)	(Month/Day/Year) if any (Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Heneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) 12/12/2007 G 900 D \$0 186,026	Month/Day/Year if any (Month/Day/Year) if any (Month/Day/Year) if any (Month/Day/Year) Image: Amount Image: Amou					

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

Remarks:

Douglas K. McClaine, 03/06/2008 **Attorney in Fact**

Date

** Signature of Reporting Person

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.