FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL					
OMB Number:	3235-0287					
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 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]							Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner X Officer (give title Other (specify below)							
(Last) (First) (Middle) 121 GAMMA DRIVE RIDC INDUSTRIAL PARK					3. Date of Earliest Transaction (Month/Day/Year) 06/08/2006														
(Street) PITTSBURGH PA 15238				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)		(State)		Zip)		<u> </u>													
1. Title of Security (Instr. 3) 2. Transact Date			2. Transaction	on 2A. I Exec		A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au 5)		d (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an				Instr. 4)
Common	Stock, no	par va	lue		06/08/20	006				G	V	2,046	D	\$0	973,6	524	Г		
Common	Stock, no	par va	lue												354,2	265	I]	By Wife ⁽¹⁾
Common	Stock, no	par va	lue												147,5	574	I		By Partnership ⁽²⁾
Common	Stock, no	par va	lue												160,3	357	I		By Wife as Frustee ⁽³⁾
Common	Stock, no	par va	lue												1,521,	889	I		As Co- Frustee ⁽⁴⁾
Common	Stock, no	par va	lue												474,156 I Co-Trust				Co-Trustee ⁽⁵⁾
Preferred	- 4-1/2%	Cumul	ative												187	7	Г		
Preferred	- 4-1/2%	Cumul	ative												93		I		By Festamentary Frust ⁽⁶⁾
			Та	ble II								osed of, convertib			lly Owned s)				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)		Execution Date, if any			ransaction Code (Instr.				6. Date Exercisab Expiration Date (Month/Day/Year)		e Amount of		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)
Explanation	of Respo	onses:			,	Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares					

- 1. I disclaim beneficial ownership of these shares.
- 2. Shares held by a family limited partnership of which I am a general partner and the other partners include members of my immediate family. I disclaim beneficial ownership of these shares except to the extent of my pecuniary interest.
- 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 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.
- 5. Shares held in trusts of which I am a trustee and in which I and members of my immediate family are among the beneficiaries.
- 6. Shares held in a testamentary trust of which I am not a trustee, in which my proportionate interest as an income beneficiary is represented by a 1/6 interest.

Remarks:

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

06/12/2006

** 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.