Edgar Filing: ACME UNITED CORP - Form 4

| ACME UNI | TED CORP | | | | | | | | | | |
|---|---|---|------------|--------------------------------------|----------------------------|--------|--|--|--------------------------|-------------|--|
| Form 4 | | | | | | | | | | | |
| July 12, 200 | 5 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | OMB AF | OMB APPROVAL | | | |
| | UNITED | STATES | | | | | NGE C | OMMISSION | OMB | 3235-0287 | |
| Check th | nis box | | Wa | shington, | D.C. 20 | 549 | | | Number: | | |
| if no lon | aer | | | | DENIER | | | | Expires: January 31 | | |
| subject t | 0 | IENI U | F CHAN | | ES IN BENEFICIAL OWNERSHIP | | | | Estimated a | ted average | |
| Section Form 4 of | | | | SECURITIES | | | | | burden hours per | | |
| Form 5 | | cuant to | Soction 1 | 6(a) of th | o Socurit | | vohonac | e Act of 1934, | response | 0.5 | |
| obligatio | | | | | | | • | 1935 or Section | , | | |
| may con | tinue. | | | vestment | • | · · | | | 1 | | |
| <i>See</i> Instr 1(b). | ruction | 50(11) | or the m | i vestinent | Compan | y 1100 | . 01 174 | 0 | | | |
| 1(0). | | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| | | | | | | | | | | | |
| | Address of Reporting | Person [*] | 2. Issue | er Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| ASEN R SO | COTT | | Symbol | | | | | | | | |
| | | | ACME | UNITED | CORP [| ACU |] | (Checl | k all applicable |) | |
| (Last) | (First) (I | Middle) | 3. Date of | f Earliest Tr | ransaction | | | (Cheer | x an appneable |) | |
| | | | (Month/I | Day/Year) | | | | DirectorX 10% Owner | | | |
| C/O ASEN AND CO., 224 EAST 07/11/2 | | | 2005 | | | | Officer (give title Other (specify below) below) | | | | |
| 49TH STRI | EET | | | | | | | below) | Delow) | | |
| | | | 4. If Ame | If Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | | Filed(Mo | onth/Day/Year) | | | | Applicable Line) | | | |
| | | | | | | | | _X_ Form filed by C Form filed by M | | | |
| NEW YOR | K, NY 10017 | | | | | | | Person | | porting | |
| (City) | (State) | (Zip) | Tab | le I - Non-D |)erivative : | Securi | ties Acar | iired, Disposed of | or Beneficial | lv Owned | |
| 1 7:41 f | 2 Turner et an Dete | 24 D | | | | | - | · - | | • | |
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | ned 3. 4. Securities Acquired n Date, if Transaction(A) or Disposed of (D) | | | | | 5. Amount of Securities | 6. Ownership | 7. Nature of Indirect | | |
| (Instr. 3) | (Wondiv Duy) Tear) | any | n Dute, n | Code (Instr. 3, 4 and 5) | | | | Beneficially | Beneficial | | |
| | | Day/Year) (Instr. 8) | | | | | Owned | (D) or Ownership | | | |
| | | | | | | | | Following | Indirect (I) | (Instr. 4) | |
| | | | | | | (A) | | Reported Transaction(s) | (Instr. 4) | | |
| | | | | Code V | A | or | Duiters | (Instr. 3 and 4) | | | |
| Common | | | | Code V | Amount | (D) | Price \$ | | | | |
| Stock | 07/11/2005 | | | S | 13,300 | D | ф 20.32 | 443,490 | D | | |
| | | | | | | | | | | | |
| Common | 07/12/2005 | | | S | 26,000 | D | \$ | 417,490 | D | | |
| Stock | | | | | | | 20.57 | | | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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 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. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-----------------------|---|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addr | ess | Relationships | | | | | | |
|--|------------|---------------|--------------|--|--|--|--|--|
| | Director | 10% Owner | Officer Othe | | | | | |
| ASEN R SCOTT C/O ASEN AND CO. 224 EAST 49TH STREET NEW YORK, NY 10017 | | Х | | | | | | |
| Signatures | | | | | | | | |
| R. Scott Asen | 07/12/2005 | | | | | | | |
| <u>**Signature of</u> Reporting Person | Date | | | | | | | |

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.