KERTON ROBERT J

Form 4 March 18, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB

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Check this box

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

obligations may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * KERTON ROBERT J

2. Issuer Name and Ticker or Trading

Symbol

SAFETY INSURANCE GROUP INC [SAFT]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year)

Director 10% Owner X_ Officer (give title Other (specify

20 CUSTOM HOUSE STREET

(Street)

(7:-

03/16/2005

below) VP - Casualty Claims

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

4. If Amendment, Date Original Filed(Month/Day/Year)

BOSTON, MA 02110

(City)

(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						
Transaction Date	2A. Deemed	3.	4. Securities Acquired (A)	5. Amount of	6.	7. Nature of		

1	.Title of	2. Transaction Date	2A. Deemed	3.	4. Securi	ties A	cquired (A)	5. Amount of	6.	7. Nature of
S	Security	(Month/Day/Year)	Execution Date, if	Transactio	or Dispo	sed of	(D)	Securities	Ownership	Indirect
(]	Instr. 3)		any	Code	(Instr. 3,	4 and	5)	Beneficially	Form:	Beneficial
			(Month/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership
								Following	or Indirect	(Instr. 4)
						(4)		Reported	(I)	
						(A)		Transaction(s)	(Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
	Common Stock	03/16/2005		A	2,271	A	(1)	153,459	D	
	Common Stock	03/16/2005		M	4,428	A	\$ 12	157,887	D	
	Common Stock	03/16/2005		S	4,428	D	\$ 36.3831	153,459	D	

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

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number.

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. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date urities (Month/Day/Year) quired or posed of tr. 3, 4,		7. Title and Ame Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	An or No of Sh
Non-Qualified Stock Options (right to buy)	\$ 12	03/16/2005		M	4,428	11/27/2004(2)	11/27/2012	Common Stock	4

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

KERTON ROBERT J 20 CUSTOM HOUSE STREET BOSTON, MA 02110

VP - Casualty Claims

Signatures

Robert J. Kerton 03/18/2005

**Signature of 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).
- Represents restricted stock award effective March 16, 2005, with respect to which sale or transfer rights shall vest over three years with (1) installments of 30% on March 16, 2006, 30% on March 16, 2007, and the remaining 40% on March 16, 2008, provided the grantee is still an employee of Safety Insurance Group, Inc. on such dates.
- Mr. Kerton was granted options to purchase 22,140 shares of common stock on November 27, 2002. These options vest in five equal 20% (2) annual installments beginning November 27, 2003. Options from this grant have been previously exercised by Mr. Kerton with respect to 4.428 shares

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.

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