## Edgar Filing: ACME UNITED CORP - Form 4

ACME UNI	TED CORP											
Form 4												
June 07, 200	7											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB AF	OMB APPROVAL			
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check th				0					Expires:	January 31,		
if no long subject to		AENT O	F CHAN	GES IN	BENEFI	CIA	L OWN	<b>VERSHIP OF</b>		2005		
Section 1				SECUR	ECURITIES				Estimated average burden hours per			
Form 4 o									response 0.5			
Form 5 obligation								e Act of 1934,				
may cont	Section 171			•	•	· ·		1935 or Section	ı			
See Instru		30(h)	of the In	vestment	Compan	y Act	of 194	0				
1(b).												
(Print or Type I	Responses)											
(I fint of Type I	(coponses)											
1. Name and A	Address of Reporting	Person *	2 Issue	Name <b>and</b>	l Ticker or '	Tradin	σ	5. Relationship of	elationship of Reporting Person(s) to			
ASEN R SC		-	Symbol	r Name <b>and</b> Ticker or Trading				Issuer				
			•	UNITED	CORP [	ACU	1					
(Last)	(First) (I	Middle)			_		,	(Check	k all applicable	)		
(Last)	(1131) (1	(vildule)	(Month/E	Earliest Transaction				DirectorX10% Owner				
C/O ASEN	AND CO., INC.,	224	06/05/2	-				Officer (give title Other (specify				
EAST 49TH			00,00,2					below)	below)			
	(Street)		4. If Ame	ndment. Da	ate Original			6. Individual or Jo	int/Group Filin	g(Check		
				endment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
					/			_X_ Form filed by O				
NEW YOR	K, NY 10017							Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)								_		
(eny)	(State)	(Zip)	Tabl	e I - Non-L	Derivative S	Securi	ties Acqu	iired, Disposed of,	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date			3.	4. Securit			5. Amount of	6.	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	•			on(A) or Dis	-		Securities Beneficially	Ownership Indirec Form: Direct Benefic	Indirect Beneficial		
(Instr. 3) any (Month/Day/Year)			Code (Instr. 3, 4 and 5) (Instr. 8)				Owned	(D) or	Ownership			
			-					Following	Indirect (I)	(Instr. 4)		
						(A)		Reported Transaction(s)	(Instr. 4)			
						or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	(				
Common Stock	06/05/2007			S	10,000	D	\$ 14.87	361,142	D			
Common Stock	06/06/2007			S	200	D	\$ 14.85	360,942	D			

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	Secur	unt of rlying	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	Other				
ASEN R SCOTT C/O ASEN AND CO., INC 224 EAST 49TH STREET NEW YORK, NY 10017		Х						
Signatures								
/s/ R. Scott Asen	06/06/2007							
**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).

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.