FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* DRISCOLL PAUL G | | | | | | 2. Issuer Name and Ticker or Trading Symbol ACME UNITED CORP [ACU] | | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | |
|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------|----------|---------------------------------|-----------------------------------------------------------------------------|---------------|-------|----------------------------------------------------------------|-------|-----------------|-----------------------------------------------------------------------------------------------------|----|---------------|-------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------|--|--|
| (Last) | (F ME UNITE | | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | | er (give title w) Vice Presid | ent a | Other (specify below) | | | |
| 55 WALLS DRIVE (Street) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applical Line) X Form filed by One Reporting Person | | | | | | |
| FAIRFIE (City) | | | 2(Zip) | | , | | | | | | | | | | | Form Pers | ı filed by Mor on | e tha | in One Rep | oorting | | |
| (0.13) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/ | | | | | tion | 2A. Exec | Deen cutio | | 3. 4. Secu Transaction Dispos Code (Instr. and 5) | | | urities Acquired (A | | | A) or 5. Am , 4 Secur Benet Owne | | ount of ities icially d | Forn (D) c Indii | rect (I) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | Code | v | Amoun | | A) or D) | Price | . ! | Repor Trans | | | tr. 4) | (Instr. 4) | | | | | | |
| Common Stock 04/28/20 | | | | | | 015 | | | M | М | | 4,748 | | \$15 | 15.65 | | 31,750 | | D | | | |
| | 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) | if any | on Date, | 4. Transac Code (In 8) | | n Number E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) | | | nt | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | | Date Exercisable | | piration ate | Title | of | imber ares | | | | | | | | |
| Employee Stock Option | \$15.65 | 04/28/2015 | | | M | | | 4,748 | 04/29/2005 | 04 | /28/2015 | Commo | | ,748 | \$15 | .65 | 140,300 | | D | | | |

Explanation of Responses:

/s/ Paul G. Driscoll

** Signature of Reporting Person

05/01/2015

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

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.

^{*} 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).