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* DUNBAR GEORGE R | | | | | | | 2. Issuer Name and Ticker or Trading Symbol ACME UNITED CORP [ACU] | | | | | | | | | | app | ip of Reporting P plicable) ctor | | Person(s) to Issuer | | |
|--|---|------------|--------|--------------------------------|---------------------------------|---|--|-------|---|----|------|----------------------------|-------|---|--------------------------------------|---|---|---|---|---|--|--|
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) $10/06/2005$ | | | | | | | | | | 0 | | er (give title | | | (specify | |
| C/O ACME UNITED CORP 60 ROUND HILL ROAD | | | | | | 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 | | | | | | | |
| (Street) FAIRFIELD CT 06824 | | | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day) | | | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. 4. Securities Acqu Disposed Of (D) (I Code (Instr. 8) and 5) | | | | | | Sed Bei Ow | 5. Amount of Securities Beneficially Owned | | 6. Ownership Form: Direct (D) or Indirect (I) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | \ | , | Amount | | (A) or (D) | Price | | | | (Instr. 4) | | (Instr. 4) | |
| Common Stock 10/06/2 | | | | | | | | | M | | | 7,50 | 00 | A | \$2 | .9 | 32,622 | | | D | | |
| Common Stock 10/06/20 | | | | | | 005 | | | М | | | 2,50 | 00 | A | \$2. | 38 | 35,122 | | 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 | | if any | emed on Date, /Day/Year) | 4. Transac Code (In 8) | | | | 6. Date Exercisal Expiration Date (Month/Day/Year | | ite | Amo Secu Und Deri | | Fitle and ount of curities derlying rivative curity (Instr. 3 | | 8. Price of Derivati Security (Instr. 5 | , I | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirect (I) (Instr. | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | e V | | (D) | Date Exercisal | | | iration e | Title | or Ni of | umber | | | | | | | |
| Director Stock Option | \$2.9 | 10/06/2005 | | | M | | | 7,500 | 04/25/20 | 1 | 04/2 | 24/2011 | Comm | | ,500 | \$2.9 | | 22,500 | | D | | |
| Director Stock Option | \$2.38 | 10/06/2005 | | | М | | | 2,500 | 04/24/20 | 00 | 04/2 | 23/2010 | Comm | | 2,500 | \$2.38 | | 20,000 | | D | | |

Explanation of Responses:

<u>/s/ George R. Dunbar</u> <u>10/07/2005</u>

** Signature of Reporting Person Date

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).