FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

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OMB APPROVAL								
OMB Number: 3235-03								
Estimated average	burden							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3	3 Holdings Repo	orted.																
Form	Transactions I	Reported.	Filed	d pursuant to S or Section 3								f 1934						
Name and Address of Reporting Person* MURPHY SUSAN H			2. Issuer Name and Ticker or Trading Symbol ACME UNITED CORP [ACU]							Relationsh heck all ap X Dire	plicable)	•						
(Last) 1 WATE	(Fir	,	Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021						ear)	Offic belo	er (give tit w)	e title Other below)			pecify	
(Street) SHELTO	ON CT		06484	4. If Amend	ment,	Date o	of Oriç	ginal File	d (Month	/Day/\	Year)	6. Lir	X Forr	n filed by C	One Re	porting F	ersor	n
(City)	(Sta	ate) (Zip)															
		Table	I - Non-Deriva	ative Secu	rities	Acc	quire	ed, Dis	posed	of, c	or B	enefici	ally Ow	ned				
Date (Month/Day/Year)		if any Code (Transaction Of (D) (Instr. 3, 4 and 5) ´		Disposed	5. Amount of Securities Beneficially Owned at el		Owners Form: E									
				(Month/Day/Year)		8)		Amount		(A) or (D)	r Price		Issuer's	s Fiscal str. 3 and	Fiscal Indir		(Inst	
Common	Stock		12/20/2021	12/20/2021 G 800 D \$32			\$32.13	.3 6,716			D							
		Та	ble II - Derivat (e.g., p	ive Securit uts, calls, v										ed				
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. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp of (D (Instrand !	r osed) r. 3, 4 5)	Expiration Date (Month/Day/Year) d Date Expiration Date (Expiration Date (Month/Day/Year)		e Expiration		7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4) Amour or Numbe of		8. Price of Derivative Security (Instr. 5)		ve es ally ig d tion(s)	10. Owners Form: Direct (or Indir (I) (Inst	hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Remarks:

/s/ Susan H. Murphy

03/23/2022

** 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).