Edgar Filing: OLSCHAN BRIAN S - Form 4

| OLSCHAN | BRIAN S | | | | | | | | | | | |
|--|--|----------------------|-------------|----------------------------|--------------------------------|-----------------------|---|--|---|--------------|--|--|
| Form 4 | | | | | | | | | | | | |
| April 25, 20 | | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | | | OMB APPROVAL | | |
| | UNITI | ED STATE: | | | | | NGE C | COMMISSION | OMB | 3235-0287 | | |
| Check th | nis box | | vv as | sington, | shington, D.C. 20549 | | | | Number: | January 31, | | |
| if no lon | GES IN BENEFICIAL OWNER | | | | NERSHIP OF | Expires. 200 | | | | | | |
| subject t Section | .0 | | | SECURITIES | | | | | Estimated average burden hours per response 0.5 | | | |
| Form 4 of | | | | | | | | | | | | |
| Form 5 | Filed | pursuant to | Section 1 | 6(a) of th | e Securi | ties E | xchang | e Act of 1934, | • | | | |
| obligation may con | | 17(a) of the | Public U | tility Holo | ding Cor | npan | y Act of | 1935 or Section | n | | | |
| See Instr | | 30(h) |) of the In | vestment | Compar | ny Ac | t of 194 | 40 | | | | |
| 1(b). | | | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | | |
| (I find of Type | (Coponses) | | | | | | | | | | | |
| 1. Name and A | Address of Repor | ting Person <u>*</u> | 2. Issue | Name and Ticker or Trading | | | ng | 5. Relationship of Reporting Person(s) to | | | | |
| OLSCHAN BRIAN S Symbol | | | | 6 | | | | Issuer | | | | |
| | | | ACME | CME UNITED CORP [ACU] | | | | (Check all applicable) | | | | |
| (Last) | (First) | (Middle) | 3. Date of | f Earliest Tr | ansaction | | | (Chee) | | | | |
| | | | (Month/E | Day/Year) | | | _X_ Director 10% Owner | | | | | |
| C/O ACME UNITED CORP, 55 04/23/2 | | | | 2019 | | | | XOfficer (give titleOther (specify below) below) | | | | |
| WALLS D | | | | | Pres, Chief Operations Officer | | | | | | | |
| | (Street) | | 4. If Ame | endment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | | | |
| Filed(Mor | | | | nth/Day/Year) | | | | Applicable Line) | | | | |
| | _X_Form filed by One Reporting Person | | | | | | | | | | | |
| FAIRFIEL | D, CT 06824 | | | | | | | Person | | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-D | Derivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | | |
| 1.Title of | 2. Transaction | Date 2A. Dee | med | 3. | 4. Securi | ties A | cquired | 5. Amount of | 6. Ownership | 7. Nature of | | |
| Security | (Month/Day/Y | ear) Executio any | on Date, if | | | | | Securities | Form: Direct Indirect | | | |
| (Instr. 3) | Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8) | | | | 5) | Beneficially Owned | (D) or Beneficial Indirect (I) Ownership | | | | | |
| | | (| ,, | (| | | | Following | (Instr. 4) | (Instr. 4) | | |
| | | | | | | (A) | | Reported Transaction(s) | | | | |
| | | | | a | | or | | (Instr. 3 and 4) | | | | |
| Common | | | | Code V | Amount | (D) | Price \$ | , | | | | |
| Stock | 04/23/2019 | | | М | 6,000 | А | ۍ 10.11 | 45,576 | D | | | |
| | | | | | | | | | | | | |
| Common | 04/23/2019 | | | D | 6,000 | D | \$ 22.18 | 39,576 | D | | | |
| Stock | | | | | | | 22.18 | | | | | |

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. Transacti Code (Instr. 8) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|---------------------------------------|---|--|--------------------|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option | \$ 10.11 | 04/23/2019 | | М | 6,000 | 01/25/2013 | 01/25/2021 | Common Stock | 6,000 |

Reporting Owners

| Reporting Owner Name / A | ddress | Relationships | | | | | | | |
|--|------------|---------------|-----------|--------------------------------------|-------|--|--|--|--|
| I B | Direc | ctor | 10% Owner | Officer | Other | | | | |
| OLSCHAN BRIAN S C/O ACME UNITED CO 55 WALLS DRIVE FAIRFIELD, CT 06824 | RP | X | | Pres, Chief Operations Officer | | | | | |
| Signatures | | | | | | | | | |
| /s/ Brian S. Olschan | 04/25/2019 | | | | | | | | |
| **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).

Remarks:

The exercise of the subject option was effected on a net cash settlement basis in a transaction directly with the issuer not invol

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.