## Edgar Filing: SAFETY INSURANCE GROUP INC - Form 4

SAFETY INSURANCE GROUP INC Form 4 September 25, 2006

September 2	25, 2000									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
if no lon subject t Section Form 4 o	<ul> <li>ger</li> <li>o</li> <li>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</li> <li>SECURITIES</li> </ul>								Expires: Estimated a burden hour response	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type	Responses)									
1. Name and A LORANGE						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(I+)	( <b>F</b> :		-	-				Director	100	0
(Last) (First) (Middle) 20 CUSTOM HOUSE STREET			(V(O))(1)/(Jav/(1)a)					Director 10% Owner _XOfficer (give title Other (specify below) below) VP - MIS & CIO		
				ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
BOSTON,						Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		Date, if	Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	09/21/2006 <u>(1)</u>	09/21/20	006(1)	М	3,877	А	\$ 13.03	287,661	D	
Common Stock	09/21/2006 <u>(1)</u>	09/21/20	006(1)	S	3,877	D	\$ 46.8257	283,784	D	

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

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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. Transactic 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 Ame Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ai or Ni of Sh
Non-Qualified Stock Options (right to buy)	\$ 13.03	09/21/2006 <u>(1)</u>	09/21/2006(1)	М	3,877	03/31/2006(2)	03/31/2013	Common Stock	3

## **Reporting Owners**

Reporting Owner Nam	e / Address	Relationships						
	Director	10% Owner	Officer	Other				
LORANGER DANIE 20 CUSTOM HOUSE BOSTON, MA 02110 Signatures	E STREET		VP - MIS & CIO					
/s/Daniel D. Loranger	09/25/2006							
**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).
- (1) The transactions reported on this Form 4 were made pursuant to a written trading plan adopted in accordance with Rule 10b5-1 on 3/29/06.

The reporting person was granted options to purchase 58,175 shares of common stock on March 31, 2003. These options vested in three
 (2) annual installments of 30% on March 31, 2004, 30% on March 31, 2005 and the remaining 40% on March 31, 2006. Options have been previously exercised and reported by the reporting person with respect to 54,298 shares.

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.