SAFETY INSURANCE GROUP INC

Form 4

October 13, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

SECURITIES

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287

Expires:

OMB

Number:

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

Section 16. Form 4 or Form 5 obligations

Check this box

if no longer

subject to

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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * BRUSSARD DAVID F			2. Issuer Name and Ticker or Trading Symbol SAFETY INSURANCE GROUP INC [SAFT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 20 CUSTOM	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/11/2005	X Director 10% Owner X Officer (give title Other (specify below) below) President, CEO and Chairman			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BOSTON, MA 02110				Form filed by More than One Reporting Person			

(City)	(State)	(Zip) Tab	le I - Non-l	Derivativo	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		sed of	` '	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	100	D	\$ 36.32	528,989	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	200	D	\$ 36.47	528,789	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	100	D	\$ 36.59	528,689	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	100	D	\$ 36.45	528,589	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	140	D	\$ 36.35	528,449	I	See (2)

Edgar Filing: SAFETY INSURANCE GROUP INC - Form 4

Common Stock	10/11/2005(1)	10/11/2005(1)	S	300	D	\$ 36.41	528,149	I	See <u>(2)</u>
Common Stock	10/11/2005(1)	10/11/2005(1)	S	200	D	\$ 36.3637	527,949	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	360	D	\$ 36.4	527,589	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	1,500	D	\$ 36.45	526,089	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	500	D	\$ 36.516	525,589	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	500	D	\$ 36.644	525,089	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	1,100	D	\$ 36.84	523,989	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	189	D	\$ 37.25	523,800	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	1,111	D	\$ 37.2946	522,689	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	900	D	\$ 36.7044	521,789	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	2,150	D	\$ 36.9903	519,639	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	2,050	D	\$ 36.8924	517,589	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	400	D	\$ 36.775	517,189	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	588	D	\$ 36.8098	516,601	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	900	D	\$ 36.75	515,701	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	700	D	\$ 36.83	515,001	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	1,700	D	\$ 37.0729	513,301	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	1,812	D	\$ 36.9817	511,489	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	500	D	\$ 36.94	510,989	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	300	D	\$ 36.78	510,689	I	See (2)
	10/11/2005(1)	10/11/2005(1)	S	500	D	\$ 36.67	510,189	I	See (2)

Edgar Filing: SAFETY INSURANCE GROUP INC - Form 4

Common Stock									
Common Stock	10/11/2005(1)	10/11/2005(1)	S	500	D	\$ 36.62	509,689	I	See (2)
Common Stock	10/11/2005(1)	10/11/2005(1)	S	600	D	\$ 36.565	509,089	I	See (2)
Common Stock							53,789	D	

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4.	5. tionNumber	6. Date Exerc Expiration D		7. Title :		8. Price of Derivative	
Security	or Exercise	(wionumbay/ rear)	any	Code	of	(Month/Day/		Underly		Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)			•	Securitie		(Instr. 5)	
	Derivative Security				Securities Acquired			(Instr. 3	and 4)		
	Security				(A) or						
					Disposed						
					of (D)						
					(Instr. 3, 4, and 5)						
					1, und 3)						
								A 0	Amount		
						Date	Expiration	Title N			
						Exercisable	Date	o			
				Code V	(A) (D)			S	hares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting owner runner runners	Director	10% Owner	Officer	Other			
BRUSSARD DAVID F 20 CUSTOM HOUSE STREET BOSTON, MA 02110	X		President, CEO and Chairman				
Signatures							

10/13/2005

**Signature of Date
Reporting Person

/ s/ David F.

Brussard

Reporting Owners 3

Edgar Filing: SAFETY INSURANCE GROUP INC - Form 4

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 sales reported on this form were made pursuant to a written trading plan adopted in accordance with Rule 10b5-1 on 3/31/05.
- (2) Shares are indirectly beneficially owned by the reporting person as trustee of The David F. Brussard Revocable Trust.

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.