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

| 1. Name and Address of Reporting Person* COOGAN KEITH | | | | | | 2. Issuer Name and Ticker or Trading Symbol COMPX INTERNATIONAL INC [CIX] | | | | | | | | | neck all ap | ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner | | | |
|--|---|------|---------|------------------|---|--|---|-------|--|------|--------------------|--|-------------------------|-------|---|---|--|--|--|
| (Last) | (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/10/2005 | | | | | | | | | Offic belo | er (give title w) | | her (specify low) | |
| 1025 ELDORADO BLVD (Street) | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Appliene) X Form filed by One Reporting Person | | | |) |
| BROOM (City) | BROOMFIELD CO 60021 City) (State) (Zip) | | | | | | | | | | | | | | Form filed by More than One Rep Person | | | Reporting | |
| | | Tabl | e I - N | on-Deriv | ative S | Secu | ıritie | s Acq | uired, I | Disp | osed of | f, or l | 3ene | ficia | lly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | Execution Date, | | | Transaction Disposi Code (Instr. and 5) | | | rities Acquired (A ed Of (D) (Instr. 3 | | | Secui | ficially d | 6. Owners Form: Dire (D) or Indirect (I) (Instr. 4) | ct of Indirect Beneficial | of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A (C | i) or | Price | Repo Trans | | (111501.4) | (111511. 4) | |
| Class A C | 2005 | 005 | | A ⁽¹⁾ | | 500 | | A | (1) | | 3,500 | 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) | Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any | | | ion Date, | 4. Transaction Code (Instr. 8) | | 5. Number of 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 Securities Underlying Derivative Security (Instr 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | hip of Indirec Beneficial Ownershi ect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | expiration Pate | Title | or Num of Shar | ber | er | | | | |

Explanation of Responses:

1. Shares issued for no cash consideration to nonemployee directors under the CompX International Inc. 1997 Long-Term Incentive Plan.

A. Andrew R. Louis, Attorneyin-fact, for Keith R. Coogan 05/18/2005

** Signature of Reporting Person Date

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

- * 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).

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.