FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0362							
Estimated average burden							
hours por rosponso	1.0						

Form 3 Holdings Reported.

1. Name and Address of Reporting Person* NACE ANDREW B				2. Issuer Name and Ticker or Trading Symbol COMPX INTERNATIONAL INC [CIX]					[Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify							
	(Fii J FREEWA	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021							- X Officer (give title Other (specify below) Executive Vice President								
SUITE 1700				4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St		Zip) e I - Non-Deriva	ative Secu	ritio	s Aco	nuire	nd Dis	nosed	of o	or Be	eneficia	Ilv Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed 3. Execution Date, if any Code (Instr.		4. Securities Acquired (A) or Dispo				5. Amount of Securities Beneficially			ership : Direct	7. Nature of Indirect Beneficial					
			(Month/Day/Year)		8)		Amoun	: [A) or D)) or Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)	
Common	on Stock \$0.01 par value		06/11/2021	06/11/202	l P		1	6	A	\$21.97		1,776		D			
Common	Stock \$0.0	1 par value	09/10/2021	09/10/202	1	P		15	.8	A		\$22.45	1,791.8		D		
Common	Stock \$0.0	1 par value	12/10/2021	12/10/202	1	P		1	5	A		\$23.87	1,806.8		1,806.8 D		
		Та	ble II - Derivat (e.g., po	ive Securit uts, calls, v									y Owne	d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	nsaction of Exp		Expi	oiration Date onth/Day/Year)		Ar Se Ur De Se	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		3. Price of Derivative Security Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia) Ownersh ct (Instr. 4)
					(A)	(D)	Date	Date Expiration				Amount or Number of Shares					

Explanation of Responses:

Andrew B. Nace

02/09/2022

** 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).