## Edgar Filing: SIMMONS HAROLD C - Form 4

| SIMMONS<br>Form 4<br>June 20, 201                                    | HAROLD C                                |                                                                                              |                                                                                               |                                                   |                                                                                                                           |       |                |                                                                                                                                                                                         |                                                                      |                                                                                               |  |  |
|----------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--|--|
| FORN                                                                 | ЛЛ                                      |                                                                                              |                                                                                               |                                                   |                                                                                                                           |       |                |                                                                                                                                                                                         | OMB AF                                                               | PROVAL                                                                                        |  |  |
|                                                                      | UNITED                                  | STATES                                                                                       |                                                                                               |                                                   |                                                                                                                           |       | NGE C          | COMMISSION                                                                                                                                                                              | OMB                                                                  | 3235-0287                                                                                     |  |  |
| Check th<br>if no long<br>subject to<br>Section 1<br>Form 4 c        | ger<br>o <b>STATEN</b><br>16.<br>or     | Washington, D.C. 20549<br>x<br>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |                                                                                               |                                                   |                                                                                                                           |       |                |                                                                                                                                                                                         |                                                                      | Number: January 31,<br>Expires: 2005<br>Estimated average<br>burden hours per<br>response 0.5 |  |  |
| Form 5<br>obligatio<br>may con<br><i>See</i> Instr<br>1(b).          | tinue. Section 17(a                     | a) of the                                                                                    | Public U                                                                                      |                                                   | ling Con                                                                                                                  | npany | y Act of       | e Act of 1934,<br>1935 or Section<br>0                                                                                                                                                  | 1                                                                    |                                                                                               |  |  |
| (Print or Type ]                                                     | Responses)                              |                                                                                              |                                                                                               |                                                   |                                                                                                                           |       |                |                                                                                                                                                                                         |                                                                      |                                                                                               |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>SIMMONS HAROLD C |                                         |                                                                                              | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol                                         |                                                   |                                                                                                                           |       |                | 5. Relationship of Reporting Person(s) to Issuer                                                                                                                                        |                                                                      |                                                                                               |  |  |
|                                                                      |                                         |                                                                                              | COMPX INTERNATIONAL INC<br>[CIX] (Che                                                         |                                                   |                                                                                                                           |       |                |                                                                                                                                                                                         | eck all applicable)                                                  |                                                                                               |  |  |
| (Last) (First) (Middle)<br>5430 LBJ FREEWAY, SUITE 1700              |                                         |                                                                                              | <ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>06/20/2012</li></ul> |                                                   |                                                                                                                           |       |                | Director<br>Officer (give below)                                                                                                                                                        | title Other<br>below)                                                | b Owner<br>er (specify                                                                        |  |  |
|                                                                      |                                         |                                                                                              |                                                                                               | If Amendment, Date Original<br>ed(Month/Day/Year) |                                                                                                                           |       |                | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |                                                                      |                                                                                               |  |  |
| DALLAS, 7                                                            | ГХ 75240                                |                                                                                              |                                                                                               |                                                   |                                                                                                                           |       |                | Person                                                                                                                                                                                  |                                                                      | porting                                                                                       |  |  |
| (City)                                                               | (State)                                 | (Zip)                                                                                        | Tabl                                                                                          | e I - Non-D                                       | erivative                                                                                                                 | Secur | ities Acq      | uired, Disposed of                                                                                                                                                                      | , or Beneficial                                                      | ly Owned                                                                                      |  |  |
| 1.Title of<br>Security<br>(Instr. 3)                                 | 2. Transaction Date<br>(Month/Day/Year) | 2. Transaction Date 2A. Deer<br>(Month/Day/Year) Execution<br>any<br>(Month/I                |                                                                                               |                                                   | n Date, if Transaction(A) or Disposed of (D) Se<br>Code (Instr. 3, 4 and 5) Be<br>Day/Year) (Instr. 8) Ov<br>Fo<br>(A) Tr |       |                | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)                                                                                          | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |                                                                                               |  |  |
| Class A<br>Common<br>Stock<br>\$0.01 par<br>value                    | 06/20/2012                              |                                                                                              |                                                                                               | Code V<br>P                                       | Amount                                                                                                                    |       | Price<br>\$ 11 | (Instr. 3 and 4)<br>360,217                                                                                                                                                             | D                                                                    |                                                                                               |  |  |
| Class A<br>Common<br>Stock<br>\$0.01 par<br>value                    | 06/20/2012                              |                                                                                              |                                                                                               | Р                                                 | 267                                                                                                                       | A     | \$<br>11.04    | 360,484                                                                                                                                                                                 | D                                                                    |                                                                                               |  |  |
| Class A<br>Common                                                    | 06/20/2012                              |                                                                                              |                                                                                               | Р                                                 | 733                                                                                                                       | А     | \$<br>11.07    | 361,217                                                                                                                                                                                 | D                                                                    |                                                                                               |  |  |

| Stock<br>\$0.01 par<br>value                      |         |   |           |
|---------------------------------------------------|---------|---|-----------|
| Class A<br>Common<br>Stock<br>\$0.01 par<br>value | 58,020  | I | by Spouse |
| Class A<br>Common<br>Stock<br>\$0.01 par<br>value | 755,104 | I | by NL (2) |
| Class A<br>Common<br>Stock<br>\$0.01 par<br>value | 3,000   | Ι | by Kronos |

#### 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.

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) |                                        | Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------|--------------------|---------------------------------------------------------------------------|----------------------------------------|--------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         | Code V                                 | (A) (D)                                                                                                     | Date<br>Exercisable | Expiration<br>Date | Title                                                                     | Amount<br>or<br>Number<br>of<br>Shares |                                      |                                                                            |

## **Reporting Owners**

**Reporting Owner Name / Address** 

Relationships

Director 10% Owner Officer Other

SIMMONS HAROLD C 5430 LBJ FREEWAY, SUITE 1700 DALLAS, TX 75240

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## Signatures

A. Andrew R. Louis, Attorney-in-fact, for Harold C. Simmons

\*\*Signature of Reporting Person

06/20/2012

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) Directly held by the reporting person's spouse. The reporting person disclaims beneficial ownership of any shares of the issuer's common stock that his spouse holds.
- (2) Directly held by NL Industries, Inc. See the Additional Information filed as Exhibit 99 to this statement for a description of the relationship to the reporting person.
- (3) Directly held by Kronos Worldwide, Inc. See the Additional Information filed as Exhibit 99 to this statement for a description of the relationship to the reporting person.

#### **Remarks:**

Exhibit Index

Exhibit 99 - Additional Information

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.