## Edgar Filing: EDELCUP NORMAN S - Form 4

EDELCUP N	IORMAN S											
Form 4												
May 28, 2009									0145.4			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
	UNITED	SIAIES		hington,			NGE V		OMB Number:	3235-0287		
Check this	s box		vv a5	inington, i	D.C. 20.	, <b>-</b> ,				January 31,		
if no long	er STATEM	IENT O	F CHAN	GES IN E	BENEFI	CIA	LOW	<b>NERSHIP OF</b>	Expires:	2005		
Subject to Section 10	subject to				TIES				Estimated average burden hours per			
Form 4 or									response 0.			
Form 5	Filed pure	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,										
obligation may conti				•	•	• •		f 1935 or Sectio	n			
See Instru		30(h)	of the Inv	vestment (	Company	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
(Thin of Type R	csponses)											
1. Name and A	ddress of Reporting I	Person <u>*</u>	2. Issuer	Name and '	Ticker or T	Fradin	σ	5. Relationship of	f Reporting Per	son(s) to		
EDELCUP NORMAN S Symbol				Name and Ticker or Trading				Issuer				
				INTERNATIONAL INC				(Check all applicable)				
												(Last)
(Month/Da				ay/Year)			Officer (give title Other (specify below)					
5430 LBJ FH	REEWAY, SUIT	E 1700	05/27/20	)09				below)	below)			
				nendment, Date Original				6. Individual or Joint/Group Filing(Check				
				(Month/Day/Year)				Applicable Line)				
								_X_ Form filed by	One Reporting Po Jore than One Ro			
DALLAS, T	X 75240							Person		eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	e 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	on Date, if TransactionAcquired (A) or					Securities	Form: Direct	Indirect			
(Instr. 3) any (Month/Day/Yea			Dav/Year)	CodeDisposed of (D)Year)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(infoliatio				5)	Following	(Instr. 4)	(Instr. 4)			
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
<b>C1</b>				Code V	Amount	(D)	Price	(mour o und 1)				
Class A												
Common Stock \$0.01	05/27/2009			A <u>(1)</u>	1,500	А	<u>(1)</u>	7,000	D			
par value												
par value												

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)

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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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/	ate Exercisable and iration Date nth/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<b>I B I I I I I I I I I I</b>	Director	10% Owner	Officer	Other			
EDELCUP NORMAN S 5430 LBJ FREEWAY, SUITE 1700 DALLAS, TX 75240	Х						
Signatures							
A. Andrew R. Louis, Attorney-in-fact Edelcup0	05/27/2009						
<u>**</u> Signature of Reporting Per	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) Shares issued for no cash consideration to nonemployee directors under the CompX International Inc. 1997 Long-Term Incentive Plan.

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.