FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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*  Wilk Jonathan						2. Issuer Name <b>and</b> Ticker or Trading Symbol CompoSecure, Inc. [ CMPO ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
								,			- ,				X	Direc	tor		10% O	wner	
(Last)	(Fi	rst) (N	Middle)		3. Da	Date of Earliest Transaction (Month/Day/Year)									X	Office	cer (give title ow)		Other ( below)	specify	
C/O COMPOSECURE, INC.						03/16/2022										Chief Executive			Officer		
309 PIERCE STREET																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SOMER	SET N.		8873												X	Form	filed by One	e Reporting Person			
SUMER	SEI IN.	Ü	88/3													Form filed by More than One Reporting					
(City)	(Si	ate) (2	Zip)													Perso	on				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			1 - 140							ı, Dis	-	<u> </u>			<u> </u>						
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (D						l and 5) Secu Bene Own		cially I Following	Forn (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)		Price	、   ·	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock 03/16/20					022				A		1,572,831	. <sup>(1)</sup> A		\$	\$0 1,5		572,831		D		
		Tal	ble II	- Derivati	ive Se	curit	ties /	Acqu	ıired,	Disp	osed of,	or B	enef	icial	ly O	wne	d				
				(e.g., pu	ıts, ca	alls, v	varra	ants,	optio	ns, o	convertib	le se	ecuri	ities	)						
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any			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 (Inst 3 and 4)		nstr.	8. Pri Deriv Secu (Instr	ative rity	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	of	nber res							

## **Explanation of Responses:**

1. Includes (i) 1,123,451 time-vested restricted stock units ("RSUs"), which will vest ratably over four years, with 25% of the award vesting on each of January 1, 2023, January 1, 2024, January 1, 2025 and January 1, 2026, respectively, subject to the reporting person's continued service as of the applicable vesting date and (ii) 449,380 performance-vested RSUs, which will vest over the applicable performance period based on the achievement of the provided performance targets, as set forth in the governing award agreement, subject to the reporting person's continued service as of the applicable vesting date. The RSUs will be settled into Class A Common Stock upon vesting.

/s/ Jonathan Wilk, by attorney-03/18/2022 in-fact Steven J. Feder

\*\* 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.