FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-0287								
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	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
\cup	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

					1 360	tion 3	su(n) of the I	iivesiiiei	it Coi	iipaiiy Act c	JI 13-	40								
1. Name and Address of Reporting Person* Hughes Brian F.				2. Issuer Name and Ticker or Trading Symbol CompoSecure, Inc. [CMPO]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
					2 Dot	o of E	orlinet Trans	nontion (A	1onth	/Day/Voor)				X Direc			10% Ov			
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023								Offic	er (give title w)		Other (s	specify				
C/O CO	MPOSECU	JRE, INC.			4 If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6 11	6. Individual or Joint/Group Filing (Check Applicable						
309 PIERCE STREET				4. Il Americanoni, Date of Original Filed (Month/Day/Teal)								Line)								
,													:	X Form filed by One Reporting Person						
(Street)															n filed by Mo	re than C	One Rep	orting		
SOMER	SET N	J 0	8873											Pers	Off					
,					Rule	Rule 10b5-1(c) Transaction Indication														
(City)	(S	tate) (Z	Zip)			_														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	ecur	ities Acq	uired,	Dis	posed of	f, or	Ben	eficia	Ily Owi	ned					
1. Title of	Security (In:	str. 3)		2. Transact			eemed	3.		4. Securitie	es Ac	cquired	(A) or		ount of	6. Owne		7. Nature		
Date (Month/Day				y/Year) Execution Dat if any (Month/Day/Ye		,	Code (Instr. !		Disposed Of (D) (Instr. 3			. 3, 4 an	d Secur Benef Owner	icially d	Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)		Price		ted action(s) 3 and 4)	<u> </u>					
Class A Common Stock 05/18/				05/18/2	2023			A		20,829(1	1)	A	\$0	71,886		D				
		Tah	ـ اا ما	Derivativ	/o So/	rurit	ies Acqu	ired D	ien	sed of	or F	Sene	ficiall	v Owne	74					
		Tab					varrants,								-u					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) or Exercise (Month/Day/Year) Price of Oerivative Execution Date, if any (Month/Day/Year)		tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	s i		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and			B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dir or I (I) (nership	Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)	Date Exercisa	able	Expiration Date	Title	or Nun of	ount nber ires							

Explanation of Responses:

1. These shares represent restricted stock units ("RSUs"), which will vest in full upon the earlier of (a) the first anniversary of the date of grant, or (b) the date of the Company's 2024 Annual Meeting of Stockholders, subject in each case to the reporting person's continued service as of the applicable vesting date, and may be settled into Class A Common Stock upon vesting.

/s/ Brian F. Hughes, by attorney-in-fact Steven J.

05/19/2023

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.