#### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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** OMB Number: 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*  TACKE KELLY  (Last) (First) (Middle)  5400 LYNDON B. JOHNSON FREEWAY,						Issuer Name and Ticker or Trading Symbol CSW INDUSTRIALS, INC. [ CSWI ]      Date of Earliest Transaction (Month/Day/Year) 10/14/2015							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  See Remarks			
(Street) DALLAS TX 75240  (City) (State) (Zip)				_	4. If Amendment, Date of Original Filed (Month/Day/Year)							. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transar Date (Month/Date					ation 2A. Deemed Execution Date if any (Month/Day/Yea		3. Transacti Code (Ins 8)	4. Secur Dispose 5)	4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		5. Amount of Securities Beneficially (D) Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership orm: Direct o) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transa	call	5. Numbe			converti	ble Securities)  7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Options (right to buy)	\$23.11	10/14/2015		A <sup>(1)</sup>		10,043		(2)	01/20/2024	Common Stock	10,043	\$0.00	10,043	D		
Stock Options (right to buy)	\$23.11	10/14/2015		A <sup>(1)</sup>		14,854		(3)	01/20/2024	Common Stock	14,854	\$0.00	14,854	D		
Stock Options (right to	\$25.23	10/14/2015		A <sup>(1)</sup>		85,981		(4)	08/28/2024	Common Stock	85,981	\$0.00	85,981	D		

## **Explanation of Responses:**

- 1. Grant of stock options received in connection with the spin-off of Issuer from Capital Southwest Corporation ("CSWC") on September 30, 2015 (the "Spin-Off") and converted from CSWC stock options held by the Reporting Person as of the Spin-Off pursuant to the Amended and Restated Employee Matters Agreement between CSWC and the Issuer, dated September 14, 2015.
- 2. One-fifth of the stock options are vested. The remaining four-fifths of the options will vest in four equal annual installments beginning January 20, 2016.
- 3. One-fifth of the stock options are vested. The remaining four-fifths of the options will vest in four equal annual installments beginning January 20, 2016.
- 4. One-third of the stock options will vest on the 90th day following the Spin-Off (the "Trigger Event Date"), one-third of the stock options with vest on the first anniversary of the Trigger Event Date and onethird of the stock options will vest on the second anniversary of the Trigger Event Date.

### Remarks:

Chief Financial Officer, Treasurer and Secretary

/s/ Kelly Tacke

10/16/2015

\*\* 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.