CommScope Holding Company, Inc.

Form 4

August 04, 2014

### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

burden hours per

response...

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005 Estimated average

0.5

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Karlsson Peter U			2. Issuer Name and Ticker or Trading Symbol CommScope Holding Company, Inc. [COMM]				g ]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
COMPAN	(First) (MSCOPE HOLD Y, INC.,, 1100 OPE PLACE, SE		3. Date of Earliest Transaction (Month/Day/Year) 08/01/2014				Director 10% Owner Officer (give title Other (specify below) SVP of CommScope, Inc.				
HICKORY	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)  HICKORY, NC 28602				- -	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed			Code (Instr. 3, 4 and 5)				6. 7. Nature of Ownership Form: Beneficial Direct (D) Ownership or Indirect (I) (Instr. 4)		
Common Stock	08/01/2014			M(1)	1,881	A	\$ 8.85	1,881	D		
Common Stock	08/01/2014			M <u>(1)</u>	5,619	A	\$ 2.96	7,500	D		
Common Stock	08/01/2014			S <u>(1)</u>	7,500	D	\$ 24.4071	0	D		

(2)

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.

SEC 1474 (9-02)

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

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)	Cransaction Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 8.85	08/01/2014		M <u>(1)</u>		1,881	01/14/2011	12/12/2016	Common Stock	1,881
Stock Option (Right to Buy)	\$ 2.96	08/01/2014		M(1)		5,619	01/14/2011	03/24/2019	Common Stock	5,619

### **Reporting Owners**

Reporting Owner Name / Address					
	Director	10% Owner	Officer		

Karlsson Peter U C/O COMMSCOPE HOLDING COMPANY, INC., 1100 COMMSCOPE PLACE, SE HICKORY, NC 28602

SVP of CommScope, Inc.

Other

Relationships

#### **Signatures**

/s/Peter U. 08/04/2014 Karlsson

\*\*Signature of Date
Reporting Person

#### **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).

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- (1) The transaction reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 6, 2014.
- The price shown is the weighted average price of the shares sold in this transaction. The price range for this transaction is \$24.10 to (2) \$24.5401. The reporting person undertakes to provide, upon request by the staff of the Securities and Exchange Commission, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price for this transaction.

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.