(Street) HICKORY

NC

28602

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

X 10% Owner

Other (specify below)

7. Nature

of Indirect Beneficial Ownership

(Instr. 4)

11. Nature

Beneficial

Ownership (Instr. 4)

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting

6. Ownership

Form: Direct

(D) or Indirect (I) (Instr. 4)

D<sup>(2)</sup>

10. Ownership Form:

Direct (D) or Indirect (I) (Instr. 4)

Director

5. Amount of

Reported Transaction(s) (Instr. 3 and 4)

Securities Beneficially Owned Following

1,251,428

9. Number of derivative

Securities

Beneficially
Owned
Following
Reported

Transaction(s) (Instr. 4)

Officer (give title below)

Instruct	tion 1(b).			Fil							rities Exchan ompany Act		f 1934			
		Reporting Person*	arolin	<u>a</u>							Symbol				ationship k all app Direc	olic
(Last) 1100 CO	•	rst) (E PLACE, SE	Middle)			Date o		est Tran	saction	(Mont	h/Day/Year)				Office	er
(Street)	RY NO	C 2	28602		4. If	Ame	ndme	nt, Date	of Origin	nal File	ed (Month/Da	ay/Year)		6. Indiv Line)	vidual o	n fi
(City)	(St	tate) (	Zip)		-									X	Form Pers	
		Tabl	le I - N	on-Deri	vative	Sec	curit	ies Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Owne	=
1. Title of	Security (Inst	r. 3)		2. Transa Date (Month/Da		Exe if a			3. Transa Code ( 8)		4. Securities Disposed O			nd 5)	5. Amo Securi Benefi Owner	itie ici d F
									Code	v	Amount	(A) or (D)	Price		Repor Transa (Instr.	act
Common	Stock, no p	ar value		04/18/	2016				S		3,800	D	\$10.	135 <sup>(1)</sup>	1,2	25
		Та	able II								osed of, convertib				wned	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)		of Der Sec Acc (A) Dis	posed D) str. 3, 4	6. Date Expira (Month	tion D		7. Title Amoun Securit Underly Derivat Securit and 4)	it of ies ying	Deri Sec (Ins	Price of erivative ecurity snstr. 5)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares			
		Reporting Person*	arolin	<u>a</u>												
(Last) 1100 CO	MMSCOPE	(First) E PLACE, SE	(M	liddle)												
(Street)	RY	NC	28	3602		_										
(City)		(State)	(Zi	ip)		_										
		Reporting Person*  lding Compar	ny, In	<u>C.</u>												
(Last) 1100 CO	MMSCOPE	(First) E PLACE, SE	(M	liddle)												
(Street)	RY	NC	28	3602												
(City)		(State)	(Zi	ip)		_										
	nd Address of	Reporting Person*														
(Last) 1100 CO	MMSCOPE	(First) E PLACE, SE	(M	liddle)												

(City) (State)	(Zip)
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## **Explanation of Responses:**

- 1. The price shown is the weighted average price of the shares sold in this transaction. The price range for this transaction is \$10.03 to \$10.27. 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.
- 2. The amount listed reflects the beneficial ownership of the issuer's securities owned by CommScope, Inc. of North Carolina ("CommScope NC"), all of which may be deemed attributable to CommScope Holding Company, Inc. and CommScope, Inc. because CommScope NC is a wholly-owned subsidiary of CommScope, Inc., which is itself a wholly-owned subsidiary of CommScope Holding Company, Inc.

## Remarks:

CommScope, Inc. of North Carolina, by its Senior Vice

President and Controller, 04/18/2016

Robert W. Granow, /s/Robert

W. Granow

CommScope Holding

Company, Inc. by its Senior

Vice President and Controller, 04/18/2016

Robert W. Granow, /s/ Robert

W. Granow

CommScope, Inc. by its Senior

Vice President and Controller,

04/18/2016 Robert W. Granow, /s/ Robert

W. Granow

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.