FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 obligations may continue. See Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Last)	1. Name and Address of Reporting Person*  Giordano Bartolomeo  (Last) (First) (Middle)  C/O COMMSCOPE HOLDING COMPANY, INC.						Issuer Name and Ticker or Trading Symbol     CommScope Holding Company, Inc. [     COMM ]      Inc. [     Ohr Inc. [									nip of Reportion policable) ector cer (give title bw) SVP & Pre	side	10% Ov Other (s below) nt, NICS	vner specify
(Street)	3642 E. US HIGHWAY 70  (Street)  CLAREMONT NC 28610				4. If Amendment, Date of Original Filed (Month/Day/Year)									Lin	e) For	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City)	3)	state) (2	Zip)			Check th	nis box	to indi	cate that	a transaction was made pursuant to a contract, instruction or written plan that is intended conditions of Rule 10b5-1(c). See Instruction 10.								nded to	
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or I	Bene	eficia	ally Ow	ned			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				Execution (/Year)			tion Date, Tra		Transaction Disposed O Code (Instr. 5)		s Acquired (A) Of (D) (Instr. 3, 4			Secu Bene Own	curities neficially		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A)	) or )	Price	Tran	nsaction(s) str. 3 and 4)			(111501. 4)				
Common Stock 06/01/2						2024					160,800(1	)   ,	A	\$ <mark>0</mark>	3	391,810 <sup>(2)</sup>		D	
Common Stock 06/01/2					2024				F		18,860(3)	]	D	\$1.4	4 3	72,950(2)	,950 <sup>(2)</sup> D		
	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		if any	emed tion Date, n/Day/Year)		ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities ired r osed ) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amou or Numb of Title Share:		nstr.	8. Price o Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- $1. \ Reflects \ restricted \ stock \ units \ that \ will \ vest \ ratably \ on \ 06/01/2025, \ 06/01/2026 \ and \ 06/01/2027, \ subject \ to \ the \ reporting \ person's \ continued \ employment \ with \ the \ issuer.$
- 2. As previously reported, includes (a) 9,734 restricted stock units that were granted on 03/01/2022 and will vest on 06/01/2025; (b) 33,867 restricted stock units that were granted on 03/01/2023 and will vest ratably on 06/01/2025 and 06/01/2025, (c) 38,134 restricted stock units that were granted on 03/01/2024 and will vest ratably on 06/01/2025 and 06/01/2025, 06/01/2026 and 06/01/2027, each subject to the reporting person's continued employment with the issuer.
- 3. Reflects shares withheld to cover taxes incurred upon the vesting of restricted stock units.

/s/ Michael D. Coppin, Under a Power of Attorney

06/04/2024

\*\* 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.