

Armstrong Philip Martin JR  
 Form 3  
 November 16, 2009

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Armstrong Philip Martin JR		(Month/Day/Year)	COMMSCOPE INC [CTV]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1100 COMMSCOPE PLACE,			(Check all applicable)	
SE			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(Street)			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
HICKORY,Â NCÂ 28602			(give title below)	(specify below)
(City)	(State)	(Zip)	Senior Vice President	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	227.12	I	By Savings Plan <sup>(1)</sup>

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

SEC 1473 (7-02)

**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.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title			

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	Expiration Date	Expiration Date	Amount or Number of Shares	Amount or Number of Shares	or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy)	03/24/2010 <sup>(2)</sup>	03/24/2019	Common Stock	3,731 \$ 9.8	D	Â
Restricted Stock Units	12/13/2009 <sup>(3)</sup>	12/13/2009	Common Stock	1,080 \$ 0 <sup>(4)</sup>	D	Â
Restricted Stock Units	01/22/2011 <sup>(3)</sup>	01/22/2011	Common Stock	1,770 \$ 0 <sup>(4)</sup>	D	Â
Restricted Stock Units	03/03/2011 <sup>(3)</sup>	03/03/2011	Common Stock	340 \$ 0 <sup>(4)</sup>	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Armstrong Philip Martin JR 1100 COMMSCOPE PLACE, SE HICKORY, NC 28602	Â	Â	Â Senior Vice President	Â

## Signatures

/s/Philip M. Armstrong, Jr. 11/16/2009

\_\_Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) Shares held by Savings Plan as of November 15, 2009.
- (2) The option vests in three equal annual installments beginning on the date indicated.
- (3) The restricted stock units vest in one installment on the date indicated.
- (4) Each restricted stock unit represents a contingent right to receive one share of CommScope common stock.

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.