

HYDROGENICS CORP
Form 4
November 05, 2014

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2015
Estimated average burden hours per response... 0.5

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 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 *
CommScope, Inc. of North Carolina

2. Issuer Name and Ticker or Trading Symbol
HYDROGENICS CORP [HYGS]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

1100 COMMSCOPE PLACE, SE

3. Date of Earliest Transaction (Month/Day/Year)
11/03/2014

____ Director 10% Owner
____ Officer (give title below) ____ Other (specify below)

(Street)

4. If Amendment, Date Original Filed (Month/Day/Year)

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

HICKORY, NC 28602

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	(A) or (D)	Price
Common Stock, no par value	11/03/2014		S		18,000	D	\$ 18.4705 <u>(1)</u>
Common Stock, no par value	11/04/2014		S		10,000	D	\$ 18.2243 <u>(3)</u>
Common Stock, no par value	11/05/2014		S		11,600	D	\$ 18.6398 <u>(4)</u>

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

__Signature of Reporting Person

Date

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).

The price shown is the weighted average price of the shares sold in this transaction. The price range for this transaction is \$18.30 to
(1) \$18.70. 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.

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
(2) CommScope NC is a wholly-owned subsidiary of CommScope, Inc., which is itself a wholly-owned subsidiary of CommScope Holding Company, Inc.

The price shown is the weighted average price of the shares sold in this transaction. The price range for this transaction is \$18.00 to
(3) \$18.52. 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.

The price shown is the weighted average price of the shares sold in this transaction. The price range for this transaction is \$18.02 to
(4) \$18.95. 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.