FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPRO              | VAL       |
|------------------------|-----------|
| OMB Number:            | 3235-0287 |
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| 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

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

| 1. Name and Address of Reporting Person*  GOLDEN BRUCE                           |   |            |   |   |      | 2. Issuer Name <b>and</b> Ticker or Trading Symbol COMSCORE, INC. [ SCOR ] |  |   |  |                                     |                     |   |   |                          |   | ionship of Reporting  <br>all applicable)<br>Director   |   | ig Perso                              | 10% Owner  |   |  |  |
|--|---|------------|---|---|------|--|--|---|--|-------------------------------------|---------------------|---|---|--------------------------|---|---|---|---------------------------------------|--|---|--|--|
| (Last)   |   |            | 3. Date of Earliest Transaction (Month/Day/Year) 07/02/2007 |   |      |  |  |   |  |                                     |                     |   | Office<br>below                           | icer (give title<br>low) |   | Other (specify below)   |   |                                       |  |   |  |  |
| 16 ST. JAMES STREET  |   |            |   |   |      |  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |  |                                     |                     |   |   |                          |   | 6. Individual or Joint/Group Filing (Check Applicable Line)   |   |                                       |  |   |  |  |
| (Street)   | •   |            |   | R                                       |      |  |  |   |  |                                     |                     |   |   |                          | X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |                                       |  |   |  |  |
| (City)   | (St   | ate) (     | Zip)  |   |      |  |  |   |  |                                     |                     |   |   |                          |   |   |   |                                       |  |   |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |            |   |   |      |  |  |   |  |                                     |                     |   |   |                          |   |   |   |                                       |  |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transplate (Month/I                          |   |            |   |   |      | Day/Year) i  |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |  | Transaction Dispose Code (Instr. 5) |                     |   | ities Acquired (A)<br>d Of (D) (Instr. 3, |                          |   | Securi<br>Benefi<br>Owned   | Securities<br>Seneficially  |                                       | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |            |   |   |      |  |  |   | Code   | v                                   | Amount              |   | (A) or<br>(D)                             | Price                    |   | Transaction(s)<br>(Instr. 3 and 4)  |   |                                       |  | (111341.4)  |  |  |
| Restricted   | 07/02   | 07/02/2007 |   |   |      | A  |  | 2,231   |  | A                                   | \$ <mark>0</mark>   |   | 2,231(1)                                  |                          |   | D   |   |                                       |  |   |  |  |
|  |   | Та         | ble II - [  |   |      |  |  |   |  |                                     | sed of,<br>onvertib |   |   |                          | y Ov  | vned  |   |                                       |  |   |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | vative Conversion Date Execution Date, if any |            |   | 4.<br>Transaction<br>Code (Instr.<br>8) |      | of Derive Securion Acque (A) or Disposof (D) (Instr.)                      | of   |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                     |                     | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |   |                          |   | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | nership<br>rm:<br>ect (D)<br>Indirect | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |  |
|  |   |            |   |   | Code | v  | (A)  | (D)   | Date<br>Exercisal  |                                     | Expiration<br>Date  | Title   | or<br>Nun<br>of                           | nber                     |   |   |   |                                       |  |   |  |  |

#### **Explanation of Responses:**

1. The grant of Restricted Stock will become fully vested upon the earlier of the first annual meeting of comScore, Inc. or on July 2, 2008.

## Remarks:

/s/ Christiana L. Lin, Attorney in Fact 07/05/2007

\*\* 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.