FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL |
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OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

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* <u>Brown Michael Andrew</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol COMSCORE, INC. [SCOR] | | | | | | | | | | all app | licable) | Person(s) to Issuer 10% Owner Other (specify | |
|---|------|------|----------------|------------|---|--|---|------|---------------------------------------|--|---|-------|---|----------------------|--|---|---|---|--|
| (Last) (First) (Middle) 11950 DEMOCRACY DRIVE SUITE 600 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/28/2015 | | | | | | | | | X | belov | | |) |
| (Street) RESTON (City) | I VA | | 20190 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | le I - Noi | n-Deriv | ative | Se | curitie | s Ac | quired | , Dis | posed o | f, or | r Ben | eficia | ally (| Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transposite (Month/L | | | | | ır) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Dispos Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Secu Bend | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | | Transa | action(s) 3 and 4) | | (111511.4) |
| Common Stock | | | | 09/28/2015 | | | | | S | | 400(1) | | D | \$44.98 | | 25,235 | | 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 Security 3. Transaction Date (Month/Day/Yet) | | | | | 4. Transaction Code (Instr. 8) | | of Derive Security (A) of Disposor (Insti | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Pri Deriv Secu (Insti | ative de se | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | or Nur of | ount nber ares | | | | | |

Explanation of Responses:

1. Shares disposed of pursuant to a 10b5-1 plan entered into in August, 2014.

Remarks:

/s/ Christiana Lin, Attorney-in-

Fact

** 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.