FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
hours por 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).

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

Name and Address of Reporting Person* Gotlieb Irwin				2. Issuer Name and Ticker or Trading Symbol COMSCORE, INC. [SCOR]						(Che	elationship o eck all applic Director	able)) Perso	10% Ow	ner		
(Last) (First) (Middle) C/O COMSCORE, INC.				3. Date of Earliest Transaction (Month/Day/Year) 03/10/2021							Officer below)	(give title		Other (sp below)	pecify		
11950 DEMOCRACY DRIVE, STE. 600			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) RESTON	N V	A	20190										X Form fi	ed by More		rting Person One Report	- 1
(City)	(S	tate)	(Zip)														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			•	Execution Date		e, Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		Beneficia Owned Fe	Form (D) or ollowing (I) (In		: Direct I r Indirect E str. 4) (7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o (D)	r Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)	
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)	erivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any		Execution Date,	4. Transaction Code (Instr.)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	J.11(3)		
Restricted Stock Units	\$0.0 ⁽¹⁾	03/10/2021		A		101,137		(2)		(2)	Common Stock	101,137	\$0	101,13	7	D	

Explanation of Responses:

 $1. \ Each \ restricted \ stock \ unit \ represents \ a \ contingent \ right \ to \ receive \ one \ share \ of \ the \ Company's \ common \ stock.$

2. This restricted stock unit award was granted pursuant to the terms of the comScore, Inc. 2018 Equity and Incentive Compensation Plan. This award, which represents compensation for the 2020-2021 director term, will vest in full on the earliest of (i) the date of the Company's 2021 annual meeting of stockholders, (ii) June 30, 2021, and (iii) the date of a change in control of the Company, subject in each case to the reporter's continued status as a member of the Company's Board of Directors on the vesting date. Vested units will be delivered in shares of common stock upon a separation from service or a change in control of the Company, as set forth in the applicable award notice.

Remarks:

/s/ Ashley Wright, Attorney-in-

03/12/2021

Fact

** Signature of Reporting Person

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.