П

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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(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

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

| 1. Name and Address of Reporting Person* FULGONI GIAN (Last) (First) (Middle) C/O COMSCORE, INC. | | n* | 2. Issuer Name and Ticker or Trading Symbol <u>COMSCORE, INC.</u> [SCOR] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|------------|----------|---|---|-------------------------------------|------------------|--|--|--|
| <u>roluoniu</u> | | | | X | Director | 10% Owner | | | |
| P | | | | x | Officer (give title | Other (specify | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | below) | below) | | | |
| C/O COMSCORE, INC. | | | 03/29/2011 | | Executive Chairman | | | | |
| 11950 DEMOCI | RACY DRIVE | | | | | | | | |
| P | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | idual or Joint/Group Filing (| Check Applicable | | | |
| (Street) | | | | Line) | | | | | |
| RESTON | VA | 20190 | | | Form filed by One Report | ting Person | | | |
| · | | | | | Form filed by More than (Person | One Reporting | | | |
| (City) | (State) | (Zip) | | | r eison | | | | |

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 A Disposed Of (| | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (instr. 4) |
| Common Stock | 03/29/2011 | | S | | 25,600 ⁽¹⁾ | D | \$29.1501 | 707,554 | D | |
| Common Stock | 03/30/2011 | | S | | 26,100 ⁽¹⁾ | D | \$29.3492 | 681,454 | D | |
| Common Stock | 03/31/2011 | | S | | 24,300 ⁽¹⁾ | D | \$29.2308 | 657,154 | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/Y | 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) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|-----|-----|--|---|-------|---|--|--|---------------------------------------|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Shares disposed of pursuant to a 10b5-1 plan entered into in November 2010.

Remarks:

/s/ Christiana Lin, Attorney-in-03/30/2011

<u>fact</u>

** 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.