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

<table>
<thead>
<tr>
<th>Code</th>
<th>Amount</th>
<th>Nature of Indirect Beneficial Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>V</td>
<td>A</td>
<td>Indirect</td>
</tr>
</tbody>
</table>

1. Title of Security (Instr. 3)
2. Transaction Date (Month/Day/Year)
3. Deemed Execution Date, if any (Month/Day/Year)
4. Transaction Code (Instr. 3, 4 and 5)
5. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)
6. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)
7. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)
8. Date Exercisable and Expiration Date (Month/Day/Year)
9. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)
10. Price ofDerivative Security (Instr. 5)
11. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)
12. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)
13. Nature of Indirect Beneficial Ownership (Instr. 4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<table>
<thead>
<tr>
<th>Code</th>
<th>(A)</th>
<th>(D)</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Title</th>
<th>Amount or Number of Shares</th>
</tr>
</thead>
<tbody>
<tr>
<td>VX</td>
<td>500,000</td>
<td>(i)</td>
<td>08/24/2032</td>
<td>Common Stock</td>
<td>500,000</td>
<td>$0</td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. This option award was granted pursuant to the terms of the comScore, Inc. 2018 Equity and Incentive Compensation Plan and vests and becomes exercisable in four equal annual installments beginning on 7/6/2023, subject to the reporter's continuous service with the Company through each vesting date.

Remarks:

/s/ Ashley Wright, Attorney-in-Fact 08/26/2022
** 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).


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.