FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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)

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* Rostock Joseph R						2. Issuer Name and Ticker or Trading Symbol COMSCORE, INC. [SCOR]									5. Relationship of Reporting (Check all applicable) Director Officer (give title		10%	ssuer Owner (specify		
(Last) (First) (Middle) C/O COMSCORE, INC. 11950 DEMOCRACY DRIVE STE, 600							3. Date of Earliest Transaction (Month/Day/Year) 03/22/2019									X Officer (give title Offier (specify below) See Remarks				
(Street) RESTON VA 20190					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					
(City)	(St		Zip)	Di-		0		- 4 -						£: - : - !!						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transa Code (8)	ction	4. Securitie Disposed (es Acquired (A) or Of (D) (Instr. 3, 4 and (D) (D) (Instr. 5) Price) or 4 and 5) rice	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock 03/22/2019 s 536(1) D \$21.11(2) 14,553 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)	ative Conversion Date Executiv rity or Exercise (Month/Day/Year) if any		on Date,	ed 4. Transaction Code (Instr.		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rative rities ired r osed)	6. Date Expirati (Month/	ion Da /Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		tr. 3	Price of erivative ecurity nstr. 5)	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)			

Explanation of Responses:

- 1. Represents the number of shares sold by the reporting person to fulfill tax withholding obligations to be funded by a "sell to cover" transaction associated with the vesting of restricted stock units on 3/15/2019 and their distribution on 3/22/2019. This transaction does not represent a discretionary trade by the reporting person.
- 2. The reported price on Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$20.84 to \$21.52 per share. The reporting person undertakes to provide to the staff of the Securities and Exchange Commission, the issuer, or any security holder of the issuer, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

Chief Information and Technology Officer

/s/ Carol DiBattiste, Attorneyin-Fact 03/25/2019

** 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.