

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

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>Abraham Magid M</u> (Last) (First) (Middle) 11465 SUNSET HILLS ROAD SUITE 200 (Street) RESTON VA 20190 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 06/26/2007	3. Issuer Name and Ticker or Trading Symbol <u>COMSCORE, INC. [SCOR]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) President & CEO	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	712,249 ⁽¹⁾	D	
Restricted Stock	100,000 ⁽²⁾	D	
Restricted Stock	21,000 ⁽²⁾	I	By Wife
Common Stock	581,876 ⁽³⁾	I	By Abraham Family Trust

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Incentive Stock Option Grant	(4)	12/15/2013	Common Stock	541,099	0.25	D	
Non-Qualified Stock Option Grant	(5)	04/08/2012	Common Stock	6,000	2.5	I	By Wife
Incentive Stock Option Grant	(6)	04/27/2014	Common Stock	5,693	0.25	I	By Wife
Incentive Stock Option Grant	(7)	04/27/2014	Common Stock	248	0.25	I	By Wife
Incentive Stock Option Grant	(8)	04/27/2014	Common Stock	10,000	0.25	I	By Wife
Non-Qualified Stock Option Grant	(8)	06/14/2015	Common Stock	8,000	4.25	I	By Wife

Explanation of Responses:

- This total includes 549,876 shares of Founders Stock; 42,373 shares converted from Series C-1 preferred stock and 120,000 shares from the exercise of stock options granted 6/6/0000.
- 25% of the Shares of Restricted Stock shall vest in equal yearly installments over a four (4) year period on each anniversary of the date of grant.
- Reporting person and spouse disclaim beneficial ownership of such shares except to the extent of their respective pecuniary interest.
- Vesting is based on milestones related to performance, of which, a total of 437,060 shares are vested as of the date hereof. Any unvested shares remaining under the this option grant, including any shares not addressed by the milestones, shall vest on the earlier of (i) December 16, 2009 or (ii) the consummation of a change in control, provided that reporting person remains a service provider.
- Options vest monthly over a three (3) month period and are fully vested as of the date herein.
- Options vested immediately upon date of grant.
- Options vest monthly over a two (2) month period and are fully vested as of the date herein.
- 1/48th of the total number of shares subject to option vest monthly.

Remarks:

/s/ Christiana L. Lin, Attorney 06/26/2007
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 5 (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.