Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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*     ALGRANATI DAVID					2. Issuer Name and Ticker or Trading Symbol COMSCORE, INC. [ SCOR ]										ck all applic Directo	tionship of Reporting all applicable) Director Officer (give title		Person(s) to Issuer  10% Owner Other (specify			
(Last) C/O CO!	(Fi MSCORE, l	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/10/2023								_ >	below)	below) below)  Chief Innovation Officer					
11950 DEMOCRACY DRIVE, STE. 600					4 1	If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable						
(Street) RESTON	N V	A	20190		-	In Antonomical, Date of Original Fried (World#Day/Teal)							Line								
(City)	(S	tate)	(Zip)																		
		Tab	le I - No	n-Deriv	/ativ	e Se	curit	ies Ac	quired,	Dis	posed c	f, or E	Bene	ficiall	y Owned						
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amou Securitie Benefici Owned F Reporte	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A	N) or D)	Price	Transaci (Instr. 3	tion(s)			(11150.4)			
Common Stock				03/10	0/2023				М		47,197	(1)	Α	<b>\$0</b> <sup>(2)</sup>	241,275		D				
Common Stock			03/13	3/2023		S		18,739	(3)	D	\$1.02	222	2,536		D						
		٦	Table II -								osed of, converti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,		ransaction ode (Instr.		ı of		6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i O F Ily D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Co	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	OI N Of	umber							
Restricted Stock Units	\$0.0 <sup>(2)</sup>	03/10/2023			M			47,197	(4)		(4)	Comm Stock		7,197	\$0	47,197	7	D			

## **Explanation of Responses:**

- 1. The shares of common stock of the Company underlying these restricted stock units will be delivered no later than 3/31/2023.
- 2. Each restricted stock unit represents a contingent right to receive one share of the Company's common stock.
- 3. 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 3/10/2023. This transaction does not represent a discretionary trade by the reporting person.
- 4. This restricted stock unit award was granted on 3/10/2021 pursuant to the terms of the comScore, Inc. 2018 Equity and Incentive Compensation Plan. This award vests in three equal annual installments beginning on 3/10/2022, subject to the reporting person's continued employment with the Company through each vesting date.

## Remarks:

/s/ Ashley Wright, Attorney-in-03/13/2023

**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 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.