FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287				
Estimated average burde	en				
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

							()				1 2									
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol COMSCORE, INC. [SCOR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Meierhoefer Cameron																Direc	tor	10%	6 Owner	
	/- ·				-									4	X Off be		er (give title v)		Other (specify below)	
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 08/12/2015									(Chief Operating Officer		er.	
C/O COMSCORE, INC.						00/12/2013										•	omer oper	uning Office	•	
11950 DEMOCRACY DRIVE, 6TH FLOOR																				
11000 D		i Diave, oiii	LOOK		4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
					. 7. "	4. II Amendment, Date of Original Flied (Month/Ddy/1edl)									Line)					
(Street)		_													X	Form	filed by One	e Reporting Po	erson	
RESTON	I VA	Λ 2	20190												Form filed by More than One Reporting					
					-											Pers		c than one iv	cporting	
(City)	(St	ate) (Zip)																	
		Tabl	e I - No	n-Deriv	ative	Se	curitie	s Acc	γuired,	, Dis	posed o	of, o	r Ben	eficia	ally O	wne	ed			
1. Title of S	Security (Inst	r. 3)		2. Transa	action	tion 2A. Deemed 3.					4. Securities Acquired (A)				5	. Amo	ount of	6. Ownership	7. Nature	
	, (- /		Date				xecution Date,				d Of (D) (Instr. 3, 4						Form: Direct		
				(Month/L	Jayiyea	ay/Year) if any (Month/Day			Code (Instr. 5) 8)					Benef Owne		cially I Following	(D) or Indirect (I) (Instr. 4)	t Beneficial Ownership		
						(-		 	(0) ==			Repo		ted	' '	(Instr. 4)	
										۱v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common Stock 08/12/2						2015			S		1,200(1	(1) D \$(\$60	60.61		7,597	D		
Common Stock 08/12/2					72013	2015			3		1,200° / D		Φ00	.01 47,557		ע				
		Та	ıble II - I	Derivat	ive S	ecu	rities	Acaui	ired. D	ispo	sed of,	or E	Benefi	ciall	v Owi	ned				
											onvertib				,					
1. Title of	2.	3. Transaction	ed	4.	1		5. Number		6. Date Exercisable and 7. Tit					8. Price of		9. Number o	f 10.	11. Nature		
Derivative	Conversion	Date	Execution		Date, Transa		of I		Expiration	Expiration Date			Amount of		Derivative		derivative	Ownersh	ip of Indirect	
Security (Instr. 3)	or Exercise Price of	(Month/Day/Year)	if any	ay/Year) Co	Code (Instr.	str. Derivative (Securities Acquired		(Month/E	Day/Ye	ear)		Securities Underlying		Security (Instr. 5)		Securities Beneficially	Form: Direct (D)	Beneficial Ownership	
(111511. 3)	Derivative		(WOILLIID		0)					Derivative			1		Owned	or Indired				
Security							(A) or Disposed of (D) (Instr. 3, 4		Secur and 4)			Security (Instr. 3				Following	(I) (Instr. 4	1)		
												and	and 4)				Reported Transaction(s)	(s)		
													(Instr. 4)							
			ļ			and 5)							-							
														ount				1		
													or Nu	nber				1		
						Code V (A) (D)				Date Expiration Exercisable Date			of					1		
							(A)	(D)	Exercisa	mie	Date	Title	= ona	ues	I			- 1		

Explanation of Responses:

1. Shares disposed of pursuant to a 10b5-1 plan entered into in June, 2014.

Remarks:

/s/ Christiana Lin, Attorney-in-08/12/2015

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.