

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

		T					Washing	aton. D	.C. 20	549										
						Washington, D.O. 20040												OMB APPROVAL		
Check this box if no longer subject to Section 16. Form 4 or Form 5 oblications may continue. See					NT O	NT OF CHANGES IN BENEFICIAL OWNE									RSHIP				verage burd	
Instruction				File			Section 16(a) 30(h) of the li							4			nours	s per re	esponse:	0.5
1. Name and Address of Reporting Person [*] Love Kathleen						2. Issuer Name and Ticker or Trading Symbol <u>COMSCORE, INC.</u> [SCOR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					suer
															X Director				10% C	wner
(Last)		3. Date of Earliest Transaction (Month/Day/Year) 05/22/2019												Other below)	(specify					
11950 DEM	OCRAC	Y DRIVE, SU	TE 600																	
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X Form filed by One Reporting Person						
RESTON VA 20190														Form filed by More than One Reporting Person						
(City) (State) (Zip)																				
		Tab	ole I - Nor	n-Deriv	ative S	Secu	urities Acc	luire	d, Di	spo	sed of,	, or	Bene	eficial	ly Owr	ned	l			
1. Title of Security (Instr. 3) 2. Transz Date (Month/D					action Day/Year)	Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)							Form: Direc (D) or Indire	n: Direct or Indirect	of Indirect Beneficial Ownership
									Code V		Amount (A) or (D)		A) or D)	Price	Transaction		ion(s)			(Instr. 4)
		1					ities Acqu warrants,								Owne	d				
1. Title of 2. 3. Transaction 3A. Deemed					4.		5. Number 6	6. Date	Exerc	sable	e and 7.	7. Title	e and		8. Price	of	9. Numbe	r of	10.	11. Natur

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	\$0.0 ⁽¹⁾	05/22/2019		Α		6,039		(2)	(2)	Common Stock	6,039	\$ 0	6,039	D	

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of the Company's common stock.

2. This restricted stock unit award was granted pursuant to the terms of the comScore, Inc. 2018 Equity and Incentive Compensation Plan. This award, which is prorated for partial service during the 2018-2019 director term, will vest in full on the earliest of (i) the date of the Company's 2019 annual meeting of stockholders, (ii) June 30, 2019, and (iii) the date of a change in control of the Company, subject in each case to the reporter's continued status as a member of the Company's Board of Directors on the vesting date. Vested units will be delivered in shares of Common Stock upon a separation from service or a change in control of the Company, as set forth in the applicable award notice.

Remarks:

/s/ Carol DiBattiste, Attorney-	05/2
in-Fact	0512
** Signature of Reporting Person	Date

/24/2019

** Signature of Reporting Person

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.