COMSCORE, INC. Form 4

March 11, 2008 FORM 4

#### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number: January 31,

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Expires: 2005 Estimated average burden hours per

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response...

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Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

Common

Common

Stock

Stock

03/10/2008

03/10/2008

(Print or Type Responses)

1 Name and Address of Departing De

Dale Grego	ory T	Symbol	cope inc iscopi	_	Issuer			
(Last)	(First) (1	Middle) 3. Date of	CORE, INC. [SCOR] of Earliest Transaction Day/Year)		(Check Director X Officer (give t		Owner	
ROAD, #2	00				below) below) Chief Technology Officer			
	(Street)		endment, Date Original onth/Day/Year)	Ap	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
	VA 20190			Per	_ Form filed by Morson	ore than One Rep	oorting	
(City)	(State)	(Zip) Tab	le I - Non-Derivative Securit	ties Acquire	ed, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquarter Transaction(A) or Disposed of Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D)	of (D) S ) F (F) F	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

1,000

1,000

(1)

(1)

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S

\$ 4.5

A

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

51,231 (2)

50,231 (2)

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### Edgar Filing: COMSCORE, INC. - Form 4

# 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Incentive Stock Option Grant	\$ 4.5	03/10/2008		M	1,000	(3)	12/27/2015	Common Stock	1,000

## **Reporting Owners**

Reporting Owner Name / Address	Kelationships					
	Director	10% Owner	Officer	Other		
Dale Gregory T 11465 SUNSET HILLS ROAD #200 RESTON, VA 20190			Chief Technology Officer			

## **Signatures**

/s/ Christiana L. Lin, Attorney in Fact

03/11/2008

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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).
- (1) These transactions were made pursuant to a 10b5-1 Plan entered into on 11/29/2007.
- Includes 18,000 shares of restricted common stock granted on 3/25/07 and 8,846 shares of restricted common stock granted on 2/18/08 (2) subject to vesting over a four (4) year period in equal 25% installments on each anniversary of the date of grants. Also includes 1,230
- (2) subject to vesting over a four (4) year period in equal 25% installments on each anniversary of the date of grants. Also includes 1,230 shares of restricted stock granted on 2/18/08 that will fully vest one (1) year from the date of grant.
- (3) 1/48th of the total number of shares subject to option vest monthly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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