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Wilson Chris	stopher T										
Form 4											
March 19, 20	018										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check th								Expires:	January 31,		
if no long subject to	NGES IN	GES IN BENEFICIAL OWNER				Estimated a	2005 1 avorago				
Section 1		SECURITIES						burden hours per			
Form 4 o	r							response 0.5			
Form 5 obligation	no *	suant to Section				•					
may cont		a) of the Public U	•	•	- ·			ı			
See Instru		30(h) of the In	nvestment	Company	y Act	t of 194	0				
1(b).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person _2. Issuer IWilson Christopher TSymbol				Traine and Trener of Training			5. Relationship of Reporting Person(s) to Issuer				
	CORE, INC. [SCOR]										
(Last)	(First) (N	Aiddle) 3. Date of	of Earliest Ti	ransaction	-		(Checl	k all applicable)		
(Lust)	(1150) (1	,	Day/Year)	ansaction			Director	10%	Owner		
C/O COMS	CORE, INC., 119		-				X Officer (give		r (specify		
DEMOCRA	CY DRIVE STE						below) Chief I	below) Revenue Office	۰ r		
	(7)										
	(Street)		endment, Da	-			6. Individual or Jo	int/Group Filin	g(Check		
	nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person						
RESTON, V	74 20190						Form filed by M				
RESTON, V	A 20170						Person				
(City)	(State)	(Zip) Tab	le I - Non-I	Derivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial			
1.Title of	2. Transaction Date		3.	4. Securiti			5. Amount of	6.	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	Code	on(A) or Dis (Instr. 3, 4	•		Securities Beneficially	Ownership Form: Direct	Indirect Beneficial		
(1130.3)		(Month/Day/Year)			r and c	,)	Owned		Ownership		
		· · · ·					Following	Indirect (I)	(Instr. 4)		
					(A)		Reported	(Instr. 4)			
					or		Transaction(s) (Instr. 3 and 4)				
~			Code V		(D)	Price	(mout 5 and 4)				
Common Stock	03/09/2018		F	10,770 (1)	D	\$ 25.88	66,115	D			

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

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 control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio		Expiration D		Amou		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day,	/Year)		rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ			Securi		(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Data	Evolution		or		
						Date Exercisable	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
Repor	r tina O	wners									

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Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Wilson Christopher T C/O COMSCORE, INC. 11950 DEMOCRACY DRIVE STE. 600 RESTON, VA 20190			Chief Revenue Officer				
Signatures							
/s/ Carol DiBattiste, Attorney-in-Fact	03/19/20	18					
<u>**</u> 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).
- These shares were withheld to fulfill tax withholding obligations with respect to the delivery of shares to the reporter under previously (1) vested restricted stock units. This was not an open market sale.

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.