FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
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).

	ions may contii tion 1(b).	nue. See		Filed							rities Exchanç company Act o		f 1934			hou	rs per re	esponse:	0.5		
Name and Address of Reporting Person* Honickman Jeffrey A						2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(Fir	,	Middle))		3. Date of Earliest Transaction (Month/Day/Year) 11/20/2021									Officer (give title Other (specify below) below)						
(Street) PHILADELPHIA PA 19103 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ZA. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (action	4. Securities Disposed Of 5)	d (A) or	5. Amount of Securities Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price	1	Reported Transaction(s (Instr. 3 and 4				(Instr. 4)		
Class A Common Stock 11				11/20/20	20/2021				A		3,786	A	\$0.000	00 151,101.962		1.9624	D				
Class A Common Stock 11/			11/20/20	21				F		146	D	\$51.5	1	150,955.9624		D					
Class A Common Stock															15	54			By Daughters		
Class A Common Stock													20,000		I		By Trust				
		Tal	ole II								posed of, convertib				Owned	i					
Security or Exer Price or Derivat	2. Conversion or Exercise Price of Derivative Security	Date Exe (Month/Day/Year) if a	Execu if any	eemed ution Date, , th/Day/Year)	4. Trans Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi (Mor	ate Exe iration I nth/Day		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr.	Der Sed (Ins	Derivative Security (Instr. 5)	9. Numbe derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficia Ownershi ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Number of Shares								

Explanation of Responses:

Elizabeth Wideman, Attorneyin-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.