Instruction 1(b)

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

OMB Number:	3235-0287							
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hours per response:	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person*		suer Name and Tic					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Honickman Jeffrey A</u>					571	1	Director	10% C	Dwner					
(Last) (First) (Mi	ddle)		ate of Earliest Trans 30/2024	saction	(Montl	n/Day/Year)		Officer (give title below)	Other below	(specify )				
ONE COMCAST CENTER	4. lf	Amendment, Date of	of Origir	nal File	ed (Month/Da	6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)								1	Form filed by On	e Reporting Per	son			
PHILADELPHIA PA 19								Form filed by Mo Person	re than One Re	porting				
(City) (State) (Zip	))	Rule 10b5-1(c) Transaction Indication												
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
Table I	- Non-Deriv	ative	Securities Acc	quired	l, Dis	sposed of	, or Be	neficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(1150.4)				
Class A Common Stock	06/30/2	2024		A		1,118	Α	\$0.0000	215,502.9754	D				
Class A Common Stock									20,150	Ι	By Trusts			
											Industry			

(e.g., puts, calls, warrants, options, convertible securities)

	(e.g., pare, care, care, content of content														
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. Transa Code ( 8)	(Instr.	of		6. Date Exerc Expiration Da (Month/Day/Y	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				

Explanation of Responses:

Elizabeth Wideman, Attorney-07/01/2024

Date

<u>in-fact</u>

\*\* 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.