FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|-------------|------|-------|--|

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person*  NAKAHARA ASUKA |  |         |          |                                   | 2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [ CMCSA ] |   |  |              |  |   |                    |                       | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |  |   |  |                |         |  |
|--|--|---------|----------|-----------------------------------|--|---|--|--------------|--|---|--------------------|-----------------------|---|--|--|---|--|----------------|---------|--|
| IVAIVA   | плил л   | SUKA    |          |                                   |  |   |  |              |  |   |                    |                       | X   | X Director   |  |   | 10% O  | wner           |         |  |
| (Last)   | (Fir   | ,       | /liddle) |                                   |  | 3. Date of Earliest Transaction (Month/Day/Year) 11/20/2021 |  |              |  |   |                    |                       |   |  | Officer (give title below)                           |   |  | Other (sbelow) | specify |  |
| (Ctroot)   |  |         |          |                                   | 4. If A  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |  |              |  |   |                    |                       |   |  | 6. Individual or Joint/Group Filing (Check Applicabl |   |  |                |         |  |
| (Street)   |  |         |          |                                   |  |   |  |              |  |   |                    |                       |   |  | X Form filed by One Reporting Person                 |   |  |                |         |  |
| PHILADELPHIA PA 19103                                    |  |         |          |                                   |  |   |  |              |  |   |                    |                       |   | Form<br>Perso  | filed by Mo<br>on                                    | re thar   | One Rep  | orting         |         |  |
| (City)   | (Sta   | ate) (Z | ːip)     |                                   |  |   |  |              |  |   |                    |                       |   |  |  |   |  |                |         |  |
|  |  | Table   | I - No   | n-Deriva                          | tive S   | Secui   | rities   | Acq          | uired  | , Dis   | posed of           | , or E                | Benef   | icially  | / Own  | ed  |  |                |         |  |
| Date   |  |         |          | 2. Transact<br>Date<br>(Month/Day | Execution Date,  |   | Transaction Disposed Of Code (Instr. 5)                        |              | s Acquired (A) or<br>If (D) (Instr. 3, 4 and |   |                    |                       |   | Form<br>(D) or   | : Direct<br>Indirect<br>str. 4)                      | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |                |         |  |
|  |  |         |          |                                   | Code   | v   | Amount   | (A) o<br>(D) | r Pri  | е   | Transa             | action(s)<br>3 and 4) |   |  | (  |   |  |                |         |  |
| Class A Common Stock 11/20                               |  |         |          | 11/20/2                           | 021  |   |  | A            |  | 3,786   | A                  | \$0                   | .0000   | 20,630.4   |  |   | D  |                |         |  |
| Class A Common Stock 11/20/2                             |  |         |          |                                   | 021  |   | F  |              | 15   | D   | \$5                | 51.51                 | 20,615.426  |  |  | D   |  |                |         |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |         |          |                                   |  |   |  |              |  |   |                    |                       |   |  |  |   |  |                |         |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any  |         |          |                                   | Transaction of Code (Instr. Derivative                             |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |              |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |                    | Dei<br>Sed<br>(Ins    | . Price of<br>lerivative<br>lecurity<br>nstr. 5)                        | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owne<br>Form:<br>Direct<br>or Ind<br>(I) (Ins        | Ownership   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                |         |  |
|  |  |         |          |                                   | Code   |   | (A)  | (D)          | Date<br>Exercis                              | sable   | Expiration<br>Date | Title                 | Amou<br>or<br>Numb<br>of<br>Share                                       | er   |  |   |  |                |         |  |

**Explanation of Responses:** 

Elizabeth Wideman, Attorney- 11/23/2021 in-fact

\*\* 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.