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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
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	tion 1(b).	iuc. See		Filed	pursua or Se	nt to S ection 3	Section 30(h) o	16(a) f the I	of the s	Securi ent Co	ties Exchang mpany Act o	e Act o f 1940	f 1934			nours	per re	esponse:	0.5
Name and Address of Reporting Person* Montiel Maritza Gomez					2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA]								ationship k all app Direc	licable)	ng Pe	rson(s) to Is			
(Last) (First) (Middle) ONE COMCAST CENTER					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2021									Officer (give title below)		Other (specify below)			
(Street) PHILAD (City)	ELPHIA P		.9103 Zip)		4. If <i>F</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	posed of	, or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Execution Date,		,	3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (I						5. Amo Securit Benefic Owned Report	ties cially Following	Forr (D)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) o (D)	r Pric	Trans		action(s) 3 and 4)			(111501. 4)
Class A Common Stock 12/31/20					021			A		310.451	A	\$0.	0000	000 11,246.60			D		
		Tal	ole II								osed of, convertib				Owne	t			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of 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 Securities Underlying Derivative Security (Ins 3 and 4)		Dei Sec (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Number of Shares						

Explanation of Responses:

Elizabeth Wideman, Attorneyin-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.