FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPRO	BAPPROVAL							
	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

Name and Address of Reporting Person* COHEN DAVID L						2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA]							(Ch	eck all applic Directo	or		10% Ow	ner	
(Last) (First) (Middle) ONE COMCAST CENTER						3. Date of Earliest Transaction (Month/Day/Year) 04/01/2014								below)	Officer (give title Other (specify below) below) Executive Vice President				
(Street) PHILADELPHIA PA 19103					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)					<u> </u>	Person													
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				action	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Followi		Form:	Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)		(1	Instr. 4)	
Class A Common Stock 04/01/2					L/2014	014		M ⁽¹⁾		110,000	A	\$17.953	3 236,24	16.3168		D			
Class A Common Stock 04/01/2					L/2014	/2014					30,474	D	\$50.068	205,77	72.3168		D		
Class A Common Stock 04/01/2				L/2014	.014			F ⁽¹⁾		71,907	D	\$50.29	2 133,86	55.3168		D			
Class A Common Stock														58,	,839			By GRAT	
Class A Common Stock						338,87		,870			Зу Trusts								
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
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. Transaction Code (Instr. 8)				6. Date Exerc Expiration Da (Month/Day/Y		ite of Securities		ties ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	vii(5)			
Option to Purchase	\$17.9533	04/01/2014			M ⁽¹⁾			110,000	(3))	11/10/2015	Class A Common Stock	110,000	\$0.0000	156,42	25	D		

Explanation of Responses:

- 1. Transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 2. This transaction was executed in multiple trades at prices ranging from \$50.05 to \$50.14. The price reported above reflects the weighted-average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.
- 3. With respect to the number of shares set forth in Column 7, this option is immediately exercisable.

Arthur R. Block, Attorney-in-

** Signature of Reporting Person

04/02/2014

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.