Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.5								

							()									
1. Name and Address of Reporting Person* NAKAHARA ASUKA				2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
					Date of Earliest Transaction (Month/Day/Year)							\dashv	Offic	er (give title	Other	(specify
(Last) (First) (Middle) ONE COMCAST CENTER				12/31/2022								belo	N)	below)	
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) PHILADELPHIA PA 19103														n filed by Mo	e Reporting Pe re than One Re	
(City)	(Sta	ate) (Z	Zip)										Feis	OII		
		Table	I - No	on-Deriva	tive \$	Securi	ities Acc	quired	l, Dis	sposed of,	or Be	neficia	lly Own	ed		
1. Title of	Security (Inst		I - No	2. Transacti Date (Month/Day	ion	2A. Dee Executi if any		3. Transa Code (8)	ction	4. Securities Disposed Of	Acquired	l (A) or	5. Am Secur Benef Owne	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
1. Title of	Security (Inst		I - No	2. Transacti Date	ion	2A. Dee Executi if any	emed ion Date,	3. Transa Code (ction	4. Securities	Acquired	l (A) or	5. Am Secur Benef Owne Repor Transa	ount of ities icially d Following	Form: Direct (D) or Indirect	of Indirect Beneficial
	Security (Inst	ır. 3)	I - No	2. Transacti Date	ion /Year)	2A. Dee Executi if any	emed ion Date,	3. Transa Code (8)	ction Instr.	4. Securities Disposed Of	Acquired (D) (Instr	I (A) or . 3, 4 and	5. Am Secur Benef Owner Repor Trans (Instr.	ount of ities icially d Following ted action(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
		ock		2. Transacti Date (Month/Day	ion //Year) 022	2A. Dee Executi if any (Month/	emed ion Date, /Day/Year)	3. Transa Code (8) Code	ction Instr.	4. Securities Disposed Of Amount	(A) or (D) A Or Bend	Price \$0.000	5. Am Secur Benef Owne Repor Transi (Instr.	ount of ities icially d Following ted action(s) 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership

Explanation of Responses:

or Exercise Price of Derivative

Security

Security (Instr. 3)

Elizabeth Wideman, Attorney- 01/04/2023 in-fact

Following Reported

Transaction(s) (Instr. 4)

Owned

Beneficially

Security (Instr. 5)

Ownership (Instr. 4)

Form: Direct (D)

or Indirect (I) (Instr. 4)

** Signature of Reporting Person

Title

Underlying Derivative

Security (Instr. 3 and 4)

Amount Number

Shares

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

if any (Month/Day/Year)

- * 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).

8)

Code

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.

Securities Acquired

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

(D)

(A)

Expiration

Date

Date

Exercisable