FORM 4

Check this box if no longer subje Section 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| ct to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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OMB APPROVAL OMB Number: Estimated average burden

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hours per response:

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* <u>Honickman Jeffrey A</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA] | | | | | | | | . Relat Check X | ionship (all applic Directo | cable) | Reporting Person(s) to Issuer ble) 10% Owner | | |
|---|--|------------|-------------|---------|-------------------|---|---|----------------------------|--|--------|---------------------------------|--|---------------------------------------|--|---|---|--|--|---|
| (Last) | (Last) (First) (Middle) ONE COMCAST CENTER | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/22/2010 | | | | | | | | | Officer (give title below) | | | Other (specify below) | |
| (Street) PHILADELPHIA PA 19103 (City) (State) (Zip) | | | | | | 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 Person | | | | | |
| | | Tab | le I - Non- | -Deriva | ative | Sec | curitie | s Ac | quired | l, Dis | sposed | of, or Be | nefici | ally (| Owned | l | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | ar) E | execution any | A. Deemed xecution Date, any //onth/Day/Year) | | Transaction Dis | | rities Acquir ed Of (D) (In: | ed (A) or str. 3, 4 a | nd Securiti | | es For ially (D) Following (I) (I | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A) o | r Pric | <u>, l</u> | Transac (Instr. 3 | tion(s) | | | (1130.4) | |
| | 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) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | oate, T | ransac Code (I | | 5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. | tive ties red sed | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Der Sed (Ins | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) |
| | | | | C | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amour or Number of Shares | er | | | | | |
| Phantom Stock | (1) | 11/22/2010 | | | A | | 6,127 | | (2) | | (2) | Class A Common Stock | 6,127 | 7 \$0 | 0.0000 | 39,613 | 3 | D | |
| Phantom Stock | (1) | 11/22/2010 | | | F | | | 215 | (3) | | (3) | Class A Common | 215 | \$(| 0.0000 | 39,398 | 8 | D | |

Explanation of Responses:

- 1. These securities convert on a one-to-one basis
- 2. The reporting person elected to defer receipt of shares of Class A Common Stock granted to the reporting person, resulting in an acquisition of phantom shares. Phantom shares will be paid in cash or shares, at the election of the reporting person, and may be re-deferred at future dates.
- 3. Although the reporting person elected to defer receipt of the shares of Class A common stock underlying the phantom shares, these shares were withheld for payment of tax liability.

Arthur R. Block, Attorney-in-11/23/2010

** Signature of Reporting Person 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.