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**

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

Washington, I	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a
contract, instruction or written plan for the purchase or sale of equity
securities of the issuer that is
intended to satisfy the affirmative

Instruction 1(b).

Name and Address of Reporting Person*     Baltimore Thomas J Jr						2. Issuer Name <b>and</b> Ticker or Trading Symbol COMCAST CORP [ CMCSA ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) ONE CO	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024								Officer (give title Other (specify below) below)					
-	DELPHIA P.		19103		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(Sta		Zip)	n Doriva	tivo 9	200111	ritios	Λ.ο.ο	uirod	Dic	nosod of	or P	onofic	ially	Own				
1. Title of Security (Instr. 3) 2. T Date				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acqui Disposed Of (D) (In 5)			ed (A) or	nd	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
			Code					v	Amount	(A) or (D)	Price	- 1		orted saction(s) r. 3 and 4)			(Instr. 4)		
Class A Common Stock 12/3				12/31/2	024				A		900	A	\$0.0	.0000 21		21,912.603		D	
Class A Common Stock																477			By Spouse
		Та	ble II ·								osed of, convertib				wne	t			
1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	Execu-			action (Instr.	5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr	rities lired r osed ) r. 3, 4	Expiration (Month/Da			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)					у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
						v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares						

**Explanation of Responses:** 

Elizabeth Wideman, Attorney- 01/02/2025 in-fact

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).