FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL C	WNERSHIP

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

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*  Brady Louise F.					2. Issuer Name <b>and</b> Ticker or Trading Symbol COMCAST CORP [ CMCSA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last)	(Fir	rst) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/03/2023									Λ		er (give title		Other (s	· I
ONE COMCAST CENTER				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													X Form filed by One Reporting Person						
PHILADELPHIA PA 19103													Form filed by More than One Reporting Person						
(City) (State) (Zip) Rule 10b5-1							0b5-1(c) Transaction Indication												
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						nded to								
		Table	I - No	n-Deriva	ative S	Secu	rities	Acc	uired	l, Dis	posed of	, or B	enefic	ially (	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execu y/Year) if any		Deemed cution Date, y nth/Day/Year)					s Acquired (A) or of (D) (Instr. 3, 4 a		and Securi Benefi		ties cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	Price	- 1-	Transa	eu ction(s) 3 and 4)			(Instr. 4)
Class A Common Stock 10/03/2				023			A		1,295	A	\$0.00	000 1,295		,295	D				
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)	tive Conversion Date ty or Exercise (Month/Day/Year) Execution Date, if any		4. Transaction Code (Instr. 8)		of Deriv	r osed ) r. 3, 4	Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		ce of rative rity : 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

**Explanation of Responses:** 

Elizabeth Wideman, Attorneyin-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).