FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* HASSELL GERALD L						2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
HASSE	LL GEN											X	Direc			Owner						
(Last)		3. Date of Earliest Transaction (Month/Day/Year) 06/30/2018										belov	er (give title v)	belov	r (specify v)							
· · · · · · · · · · · · · · · · · · ·		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)										
(Street) PHILADELPHIA PA 19103															X	, ,						
																Form Pers		e than One Re	porting			
(City) (State) (Zip)																						
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed o	f, or	Ben	efici	ally (Owne	ed					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			3. Transa Code (1 8)	ies Acquired (A) or Of (D) (Instr. 3, 4 a			and 5) Secur Benef		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A (D) or)	Price		Transa	action(s) 3 and 4)		(1130.4)				
Class A C	ommon Sto	ock	06/30/2018 A 420 A \$0.0000 29,256.901 D																			
Class A C	ommon Sto	ock		06/30	/2018				F		5		D	\$32	.81	29,	251.901	D				
		Та									osed of, onvertib					vned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,		Transaction Code (Instr.		of		Exercision Date		Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3		vative der ser ser ser ser ser ser ser ser ser s	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	or Nu of	nount mber ares								

Explanation of Responses:

Arthur R. Block, Attorney-in-

fact

** Signature of Reporting Person

07/03/2018

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.

 $^{^{\}star}$ 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).