FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|

OMB APPROVAL 3235-0287 OMB Number: 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

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|--|-----------|--|--|------------------------------|---|--|--|------------------|------------------------------------|---|---------------------|-------------------------------|-----------------------------|---|---|---|---|---------------------------------------|--|
| 1. Name and Address of Reporting Person* NAKAHARA ASUKA | | | | | 2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| | | | | 1 | | 101 | | | | | | | | X Dire | ctor | 10% | Owner | | |
| (Last) (First) (Middle) ONE COMCAST CENTER | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2018 | | | | | | | | | Office belo | er (give title w) | Other below | (specify /) | | |
| | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6 | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| (Street) PHILAD | ELPHIA PA | A | 19103 | | | | , | | 3 | | , | , | , | | ine) X Fori | n filed by One | e Reporting Per | son | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | Fori Per | | re than One Re | porting | |
| | | Tabl | le I - No | n-Deriv | ative | Secu | ırities | Acq | uired, | Dis | posed o | f, o | or Ber | efici | ally Own | ed | | | |
| Date | | | 2. Transa Date (Month/D | Executio eay/Year) if any | | cution Date, | | | | ies Acquired (A) o Of (D) (Instr. 3, 4 | | | nd 5) Secur Bene Owne | ities Ficially (I d Following (I | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | action(s) 3 and 4) | | (Instr. 4) | |
| Class A Common Stock 03/31/ | | | | 2018 | | | | A | | 403 | | A | \$0.0 | 000 | 5,874 | D | | | |
| Class A Common Stock 03/31 | | | 03/31/ | ./2018 | | | | F | | 3 | | D | \$34.17 | | 5,871 | D | | | |
| | | Ta | | | | | | | | | sed of, onvertib | | | | y Owned | | | | |
| Derivative Conversion Date | | 3. Transaction Date (Month/Day/Year) | 3A. Deen Executio if any (Month/D | n Date, | 4. Transac Code (Ir 8) | tion istr. | 5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5) | ive ies ed | 6. Date E Expiratic (Month/I | on Dat | | Am Sec Un Der Sec | or | nstr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Arthur R. Block, Attorney-in-

Shares

fact

Title

** Signature of Reporting Person

04/03/2018

Date

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

Code V

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.

(A) (D) Exercisable Date

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