FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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/achinaton	$D \subset 2$	05/0		

0	ME	3 APPROVAL	

l	OMB Number: Estimated average burden	3235-0287
	Estimated average burden	
	l	0.1

## 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

Name and Address of Reporting Person*     BONOVITZ SHELDON M						2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [ CMCSA ]							(Chec	5. Relationship of R (Check all applicabl X Director Officer (gi		Person	10% Ov	wner	
	MORRIS 8	First) & HECKSCHER ACE, 43RD FLO				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2009								below)	ve uue	title Other (spe below)		эрсыу	
(Street) PHILADELPHIA PA 19103						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)																
			Table I - N	lon-D	eriva	ative	Sec	urities A	cquire	d, D	isposed (	of, or E	3enef	icially C	Owned				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and		r and 5)	5. Amount of Securities Beneficially Owned Following		6. Owne Form: D (D) or In (I) (Instr.	irect Ir direct B 4) O	. Nature of ndirect eneficial whereship		
							Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				nstr. 4)		
Class A Special Common Stock <sup>(1)</sup>			01/	01/02/2009				M		58,452	2   .	A	\$ <mark>0</mark>	58,45	2	D			
Class A S	Special Com	nmon Stock <sup>(2)</sup>		01/	02/20	09			F		24,549.72	224	D	\$17.29	33,902.2	776	D		
Class A S	Special Com	nmon Stock			131,792 I					By Family Partnership									
Class A S	Special Com	ımon Stock													19,270 I By GRAT			By GRATs	
Class A Special Common Stock													8,645	5	I	Е	By Spouse		
			Table I					rities Acc							vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transa Code ( 8)	5. Number of action Derivative		6. Date Exercisable Expiration Date (Month/Day/Year)		isable and	7. Title and Amou Securities Underl Derivative Securit (Instr. 3 and 4)		ount of erlying	ng Derivative		ber of ive ies sially ng	10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title		ount or nber of ires			Transaction(s) (Instr. 4)		
Phantom Stock	(3)	01/02/2009			М			58,452.813	(4	)	(4)	Class A Special Commo Stock	l   <sub>58</sub>	,452.813	\$0	0.00	000	D	

## **Explanation of Responses:**

- 1. Shares acquired on settlement of phantom stock. The reporting person received cash for the fractional shares
- 2. Shares withheld for payment of tax liability.
- 3. These securities convert on a one-to-one basis
- 4. The reporting person elected to defer receipt of shares of Class A Special Common Stock issuable upon exercise of options, resulting in an accrual to his account of additional 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.

## Remarks:

/s/ Bonovitz, Sheldon M.

01/05/2009

\*\* 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.