FORM 4

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

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*  ROBERTS RALPH J					2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [ CMCSA ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
	ST CORPO		(Middle) ON			3. Date of Earliest Transaction (Month/Day/Year) 07/15/2004								C Officer (give title Other (specific below)  Chairman-Exec & Finance Comm				, l	
(Street) PHILADELPHIA PA 19102 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year) 07/15/2004								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)		(State)	,	lon-De	rivati	ivo	Securities A	cauire	4 D	ienoead	of or E	onof	icially Ov	vned					
1. Title of Security (Instr. 3)  2. Trans: Date			Transaction ate		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5			or	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Special Common Stock 07/13				07/15	5/2004	2004		M		4,164,5	23 .	4	(1)	5,854,605	5 D				
Class A Special Common Stock 07				07/15	15/2004			F		1,428,43	32(2)	)	\$27.79 <sup>(3)</sup>	4,426,173	4,426,173				
Class A Special Common Stock													346,456		I		Family rtnerships		
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title a Securitie Derivativ and 4)	s Unde		8. Price of Derivative Security (Instr. 5)	deriva Securi Benefi Owned Follow	rities ficially d wing	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	ode V	(A)	(D)	Date Exercis		Expiration Date	Title		ount or Numb hares	er	Repor Transa (Instr.	action(s)			
Phantom Stock	\$0.0000 <sup>(4)</sup>	07/15/2004		М			4,164,523.4231	(5)		(5)	Class A Special Common Stock	4,1	64,523.423	\$1 \$0	0.0	.0000	D		

## **Explanation of Responses:**

- 1. Shares acquired on settlement of phantom stock. The reporting person received cash for the fractional shares.
- 2. In the original Form 4 filed on July 15, 2004, the number of shares withheld for payment of tax liability was inadvertently miscalculated. This amended Form 4 corrects that error.
- 3. Shares withheld for payment of tax liability.
- 4. These securities convert on a one-to-one basis.
- 5. 7/15/04.

## Remarks:

/s/ Roberts, Ralph J.

07/22/2004

\*\* 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.