Instruction 1(b).

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP
OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average burden									
hours per response:	1.0								

Form 3 H	Holdings Repo	rted.															
Form 4 T	ransactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ac								
Name and Address of Reporting Person* COHEN DAVID L					2. Issuer Name and Ticker or Trading Symbol COMCAST CORP [CMCSA]						5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director 10% Ov			Owner			
(Last) (First) (Middle) ONE COMCAST CENTER				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009					/Year)	X Officer (give title Other (specify below) Executive Vice President							
(Street) PHILADELPHIA PA 19103				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)																	
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quir	ed, Di	sposed	of, or	Benefici	ally Own	ed				
Da			2. Transaction Date (Month/Day/Year)	Execution Date, Trans		ate, Transaction Code (Instr.					or Disposed	5. Amount of Securities Beneficially Owned at end			ership I n: Direct I	7. Nature of Indirect Beneficial Ownership	
						o,	Amount			(A) or (D)	Price	Issuer's	Issuer's Fiscal Year (Instr. 3 and			(Instr. 4)	
Class A Common Stock			12/10/2009			G		2,993		D	\$ <mark>0</mark>	222,10	222,102.6868		D		
Class A Common Stock			12/10/2009		G			14,	965	D \$0		207,137.6868			D		
Class A Common Stock						1						96,649			I]	By GRATs	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
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)	5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instr and §	rative rities ired r osed)	Expii (Mon	ate Exercisable and iration Date nth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of Title Shares		8. Price of Derivative Security (Instr. 5) (Instr. 5) Reported Following Reported Transacti (Instr. 4)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

/s/ David L. Cohen

01/12/2010

** 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.

^{*} 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).