FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID AFFROVAL								
OMB Number:	3235-028							
Fatimated average b	urdon							

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

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
hours per response:	0.5						

1. Name and Address of Reporting Person*  BREEN EDWARD D						2. Issuer Name <b>and</b> Ticker or Trading Symbol  COMCAST CORP [ CMCSA ]										tionship of Reporting I all applicable) Director		1	Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) C/O COMCAST CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2009										Officer (give title below)			Other (specify below)	
1500 MARKET STREET					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
PHILADELPHIA PA 19102															X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	ate) (	Zip)																	
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	lly (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution ay/Year) if any		A. Deemed xecution Date, any Month/Day/Year)				ties Acquired (A) I Of (D) (Instr. 3, 4			4 and S				hip ect rect )	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111511.4)		
Class A Common Stock 10/0						0/01/2009			A		478.6216		A	\$0		6,468.3126		D		
	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)	erivative Conversion Date Execution D curity or Exercise (Month/Day/Year) if any				Date, Transaction Code (Instr.		of Deriva Secur Acqui (A) or Dispo of (D) (Instr.	of Expirati			. Date Exercisable and expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha	nber						

**Explanation of Responses:** 

Arthur R. Block, Attorney-infact for Edward D. Breen

10/05/2009

\*\* 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.