

COMCAST CORP Reported by MURDOCK DANIEL C.

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/20/17 for the Period Ending 04/18/17

Address 1500 MARKET STREET

PHILADELPHIA, PA 19102

Telephone 215-286-3344

CIK 0001166691

Symbol CMCSA

SIC Code 4841 - Cable and Other Pay Television Services

Industry Broadcasting

Sector Consumer Cyclicals

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Murdock Daniel C.					COMCAST CORP [CMCSA]							Director		10	% Owner	
(Last	(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							X Officer (give title below) Other (specify below)				fv below)
ONE COMCAST CENTER					4/18/2017							SVP & Chief Accounting Officer				
	(Str	eet)		4.	If A	mend	lment, Date	Orig	ginal Fil	ed (MM/I	DD/YYYY)	6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)
PHILADELPHIA, PA 19103 (City) (State) (Zip)												X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	(50	(2.5		Non-De	eriva	itive S	Securities A	cqu	ired, Di	sposed	of, or Bei	neficially Owne	ed			
1.Title of Security (Instr. 3) 2. Trans. Dat				e 2A. Deemed Execution Date, if any		3. Trans. Coo (Instr. 8)	de	4. Securities Acquired Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership of Indirect Form: Beneficial		
							Code	v	Amount	(A) or (D)	Price					Ownership (Instr. 4)
Class A Common Stock 4/18/2017				8/2017			M		1020.000	0 A	\$0.0000	3147.7960			D	
Class A Common Stock 4/18/2017				8/2017			F		381.0000	D	\$37.5900	2766.7960			D	
	Tab	ole II - Der	ivative Se	curities	Ben	neficia	ally Owned	(e.g	g. , puts	, calls, v	varrants,	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deemed Execution Date, if any	Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date		7. Title and Securities U Derivative S (Instr. 3 and	Inderlying Security	Derivative Security	9. Number of derivative Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	v	(A)	(D)	Dat Exe	te I ercisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Restricted Stock Units	\$0.0000 (1)	4/18/2017		М			1020.0000		(2)	<u>(2)</u>	Class A Common Stock	1020.0000	\$0.0000	42100.0000	D	

Explanation of Responses:

- (1) Each restricted stock unit represents a contigent right to receive one share of Class A Common Stock.
- (2) These restricted stock units vest on the transaction date.

Reporting Owners

reporting owners									
Panarting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Murdock Daniel C.									
ONE COMCAST CENTER			SVP & Chief Accounting Officer						
PHILADELPHIA, PA 19103									

Signatures

Arthur R. Block, Attorney-in-fact

** 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 control number.