#### COMCAST CORP Form 3 February 27, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per response... 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

### (Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> NAKAHARA ASUKA			2. Date of Eve Statement (Month/Day/Y		<sup>1g</sup> 3. Issuer Name <b>and</b> Ticker or Trading Symbol COMCAST CORP [CMCSA]					
(Last) (H	First)	(Middle)	02/24/2017		4. Relationship of Reporting Person(s) to Issuer		;	5. If Amendment, Date Original Filed(Month/Day/Year)		
ONE COMCAST CENTER (Street) PHILADELPHIA, PA 19103					(Check all applicable)			, <b>,</b> ,		
					X_ Director 10% Owner OfficerOther (give title below) (specify below)		Owner	<ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_Form filed by One Reporting</li> <li>Person</li> <li> Form filed by More than One</li> <li>Reporting Person</li> </ul>		
(City) (S	state)	(Zip)		Table I - N	on-Derivat	ive Securiti	es Be	neficially Owned		
1.Title of Security (Instr. 4)				2. Amount of Beneficially ( (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	*		
Class A Commo	on Stock			4,192		D	Â			
Reminder: Report o owned directly or ir	directly. Person	s who resp	ond to the co	ollection of	ally SI	EC 1473 (7-02	)			
	require	d to respo	ined in this fe nd unless the IB control nu	form displa	ays a					

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

Shares

(I) (Instr. 5)

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
NAKAHARA ASUKA ONE COMCAST CENTER PHILADELPHIA, PA 19103	ÂX	Â	Â	Â		
Signatures						
/s/ Arthur R. Block, Attorney-in-fact	02	2/27/2017				
<u>**</u> Signature of Reporting Person		Date				

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).

### Â **Remarks:** Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.