COMCAST CORP

Form 4

December 23, 2004

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

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

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **BURKE STEPHEN B**

2. Issuer Name and Ticker or Trading Symbol

COMCAST CORP [CMCSA]

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year)

Director 10% Owner _X__ Officer (give title Other (specify

COMCAST CORPORATION, 1500

12/22/2004 below)

COO & Executive Vice President

(Check all applicable)

MARKET STREET

(Street)

Applicable Line)

4. If Amendment, Date Original Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

PHILADELPHIA, PA 19102

(City)	(State)	(Zip) Tal	ble I - Non	-Derivativ	e Secu	rities Acqui	red, Disposed of, o	r Beneficially	Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class A Special Common Stock (1)	12/22/2004		Code V M	Amount 8,658	(D)	Price \$ 17.3282	119,642.0239	D	
Class A Special Common Stock (1)	12/22/2004		M	14,422	A	\$ 17.3282	134,064.0239	D	
Class A Special Common Stock							23,071.92	I	By 401(k)

Edgar Filing: COMCAST CORP - Form 4

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

SEC 1474 (9-02)

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase	\$ 17.3282	12/22/2004		M	8,658	(3)	06/03/2008	Class A Special Common Stock	8,658
Option to Purchase	\$ 17.3282	12/22/2004		M	14,422	(3)	06/03/2008	Class A Special Common Stock	14,422

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BURKE STEPHEN B COMCAST CORPORATION 1500 MARKET STREET PHILADELPHIA, PA 19102

COO & Executive Vice President

Signatures

/s/ Burke,
Stephen B.

**Signature of Date

**Signature of
Reporting Person

Explanation of Responses:

- * 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).

(1) Shares acquired upon exercise of options.

Reporting Owners 2

Edgar Filing: COMCAST CORP - Form 4

- (2) This is an option to purchase Class A Special Common Stock.
- (3) 23,080 shares are immediately exercisable, and 17,310 shares are exercisable on 6/03/2007.

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.