FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SHATTUCK MAYO A III						2. Issuer Name and Ticker or Trading Symbol EXELON CORP [EXC]									all app	olicable) ctor	g Person(s) to Is	Owner
(Last) (First) (Middle) 10 SOUTH DEARBORN STREET 54TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2017										belov	,	X Other below	(specify
(Street) CHICAGO IL 60603				4. If Amendment, Date of Original Filed (Month/Day/Year)									ndivi ne) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St		(Zip)															
			le I - Noi	1					Dis									
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Securi Benefi		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount (/		(A) or (D)	Price	- 1	Transa	action(s) 3 and 4)		(1130.4)
Common Stock (Def. Stock Units) 06					2017			A		990		A	\$36	.62	15,593(1)		I	By. Exelon Directors Deferred Stock Unit Plan
Common Stock															30	67,649	D	
Common Stock															2	,075 ⁽²⁾	I	By 401(k) plan
Common Stock															10,000(3)		I	By Lizzie Mae, LLC
		Ta	able II - I (sed of, onvertib				y Ow	ned			
Derivative Conversion Date Execut Security or Exercise (Month/Day/Year) if any				Date, T	ransacti Code (Ins	saction of		6. Date E Expiratio (Month/E	n Date	9	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			Derivativ Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	of Pesnons			C	Code V	(A) (D)	Date Exercisa		Expiration Date	Title	or Nur of	ount mber ares					

- 1. Balance includes 129 shares acquired on June 9, 2017 through automatic dividend reinvestment.
- 2. Shares held as of May 31, 2017 in a multi-fund 401(k) Plan to be settled in cash upon the reporting person's termination of employment for any reason on a 1:1 basis. Shares are acquired through regular periodic contributions, company matching contributions, and the automatic reinvestment of dividends.
- 3. Lizzie Mae, LLC, is a limited liability company of which the reporting person is the manager and to which the reporting person transferred shares of his Exelon common stock. On December 18, 2012, the reporting person transferred 1/3 membership interests in Lizzie Mae, LLC, to each of three trusts, each one for the benefit of one of the reporting person's three minor children. The reporting person's wife is a trustee of each of the trusts. The reporting person disclaims beneficial ownership of the Exelon Corporation common stock held by Lizzie Mae LLC except to the extent of his pecuniary interest therein.

Remarks:

Scott N. Peters, Esq., Attorney 06/30/2017 in Fact for Mayo A. Shattuck Ш

Date

** Signature of Reporting Person

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.