## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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

1. Name and Address of Reporting Person*  ROGERS JOHN W JR				2. Issuer Name <b>and</b> Ticker or Trading Symbol EXELON CORP [ EXC ]								(Che	5. Relationship of Reporti (Check all applicable) X Director		.,	Suer	
(Last) (First) (Middle) 10 SOUTH DEARBRON STREET 54TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2009									below)	(give title	below		
(Street) CHICAGO	IL	60	603		4. 11 A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person			
(City)	(State	e) (Zip	0)														
		Table	I - No	n-Deriv	ative	Secu	rities	Acq	uired,	Dis	posed of	, or Ben	eficiall	y Owned			
Date			Date	ransaction e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)		(Instr. 4)
Common Stock (Deferred Stock Units) 12				12/31	1/2009				A		490	A	\$51.0	4 16,2	39(1)	I	By Exelon Directors' Deferred Stock Unit Plan
Common Stock (Deferred Stock Units)														3,5	<del>9</del> 0 <sup>(2)</sup>	I	By Unicom Directors' Stock Unit Plan
Common Sto	ock											11,374 D					
		Ta									osed of, o			Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution	med 4.		ction	5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and e	7. Title and Amount of Securities Underlying Derivative (Instr. 3 and	d f Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownersh S Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares				
Deferred Compensation - Phantom Shares	(3)	12/31/2009			A		538		(3)		(3)	Common Stock	538	\$48.87	10,894	(4) D	

## **Explanation of Responses:**

- 1. Balance also includes 160 shares acquired on 12/10/2009 through the automatic dividend reinvestment feature of Exelon plans.
- 2. Balance also includes 37 shares acquired on 12/10/2009 through the automatic dividend reinvestment feature of Exelon plans.
- 3. Phantom shares held in a multi-fund deferred compensation account to be settled for cash on a 1:1 basis upon the reporting person's termination of employment for any reason. Shares are acquired through regular periodic contributions and the reinvestment of dividend equivalents.
- $4. \ Balance \ also \ includes \ 105 \ shares \ acquired \ on \ 12/10/2009 \ through \ the \ automatic \ dividend \ reinvestment \ feature \ of \ Exelon \ plans.$

## Remarks:

Lawrence C. Bachman, Esq., Attorney in Fact for John W.

12/31/2009

Rogers, Jr.

\*\* 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.