FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

AN

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinaton | $D \subset$ | 205/10 |
|-------------|-------------|--------|
| Washington, | D.C. | 20549 |

| NUAL STATEMENT OF CHANGES IN BENEFICIAL |
|---|
| OWNERSHIP |

| OMB APF | PROVAL |
|--------------------|-----------|
| OMB Number: | 3235-0362 |
| Estimated average | burden |
| hours per response | . 10 |

Instruction 1(b)

| Form 3 | Holdings Repo | orted. | | | | | | | | | | | | | io per ic | соропос. | 1.0 | | |
|---|---|--|---|--|---|---|--|------------------------|-----------------------------|---|--|---|---|---|---------------------|--|---|--|--|
| Form 4 | Transactions F | Reported. | Fil | ed pursuant to or Sectio | | | | | urities Excha Company Ac | | of 1934 | | | | | | | | |
| 1. Name and Address of Reporting Person* <u>CLARK FRANK M</u> | | | | 2. Issuer Name and Ticker or Trading Symbol EXELON CORP [EXC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | | |
| | (Last) (First) (Middle) 10 SOUTH DEARBORN STREET 54TH FLOOR | | | | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2011 | | | | | | | | X Officer (give title Other (specify below) Chairman and CEO of ComEd | | | | | |
| (Street) CHICAGO IL 60603 (City) (State) (Zip) | | | | _ | 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 | | | | | | | |
| 1. Title of Security (Instr. 3) 2. | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | | 3. Transaction Code (Instr. | | ed, Disposed of, or Benefic 4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5) | | | | | | | of 6. Owne | | . Nature of ndirect leneficial le | | | |
| | | | (MONth/Day) | (Month/Day/Year) | | 8) | | nount (A) or (D) Price | | Price | Issuer's | | | | ct (I) (| Instr. 4) | | | |
| Common Stock | | | | | | | | | | | | | 24,9 | ,935(1) | | D | | | |
| | | Ta | able II - Deriva e.g., p | tive Secu outs, calls, | | | | | | | | | wned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration (Month/Da | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | De Se (In: | Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transact (Instr. 4) | e s ally g | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) | | |
| | | | | | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |
| Deferred Comp. Phantom Shares | (2) | | | | (2) (2) Common Stock 6,081 6,081 | | 1 | D | | | | | | | | | | | |
| NQ Stock Options 01/24/2005 | \$42.85 | | | | | | (3) |) | (3) | Commo Stock | 36,000 | | | 36,00 | 00 | D | | | |
| NQ Stock Options 01/23/2006 | \$58.55 | | | | | | (3) |) | (3) | Commo | 30,000 | | | 30,00 | 00 | D | | | |

Explanation of Responses:

- 1. Balance includes the following shares acquired through the automatic dividend reinvestment feature of Exelon plans: 289 shares on 3/10/2011; 302 shares on 6/10/2011; 307 shares on 9/9/2011; and 298 shares on 12/9/2011.
- 2. Phantom shares held in a multi-fund deferred compensation plan to be settled for 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. Non qualified employee stock options, awarded pursuant to the Exelon Long Term Incentive Plan. Options vest in 1/4 increments on each of the first four anniversaries of the grant date, referenced in column one, and expire on the tenth anniversay of the grant date.

Remarks:

Frank M. Clark

01/18/2012

** 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.