## FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| OMB APPROVAL             |           |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per respons        | e: 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*  CLARK FRANK M  (Last) (First) (Middle)  10 SOUTH DEARBORN STREET  37TH FLOOR  (Street)  CHICAGO IL 60603  (City) (State) (Zip) |   |            |                              |  |   | 2. Issuer Name and Ticker or Trading Symbol EXELON CORP [ EXC ]  3. Date of Earliest Transaction (Month/Day/Year) 08/31/2007  4. If Amendment, Date of Original Filed (Month/Day/Year) |                             |                           |                                   |   |                 |                 |   | 6. Ir   | 5. Relationship of Reporting Person(s) to Issuer Check all applicable)  Director 10% Owner X Officer (give title below)  Chairman and CEO of ComEd  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person |  |  |   | vner specify d plicable   |
|--|---|------------|------------------------------|--|---|--|-----------------------------|---------------------------|-----------------------------------|---|-----------------|-----------------|---|---|---|--|--|---|---|
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |   |            |                              |  | action<br>Day/Yea   | 2A. Deemed Execution Date, if any (Month/Day/Year)   |                             |                           | 3.<br>Trans<br>Code<br>8)<br>Code | v<br>Oisp   | Amount (A) or P |                 |   | A) or<br>, 4 and<br>Price   | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)   |  | Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                  |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | titve or Exercise (Month/Day/Year) 3) Price of Derivative Security  Execution Date, if any (Month/Day/Year) 8 |            | Transaction (Code (Instr. I) |  | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |  | 6. Date Expiration (Month/D | xercis<br>n Date<br>ay/Ye | able and                          | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)  Amo or Num of Title Shai |                 | urity ount      | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Own<br>Forr<br>Dire<br>or In<br>(I) (II   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |   |
| Deferred<br>Comp.<br>Phantom<br>Shares   | (1)   | 08/31/2007 |                              |  | A   | •  | 38                          | (5)                       | (1)                               | 5.6   | (1)             | Common<br>Stock |   | 38  | \$70.67   | 332  |  | D |   |

## **Explanation of Responses:**

1. 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.

## Remarks:

Scott N. Peters, Attorney in Fact for Frank M. Clark

09/04/2007

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.