### 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
notruction 1/h)

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AF	PPROVAL								
OMB Number:	3235-0287								
Estimated average burden									

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* <u>CANNING JOHN A JR</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>EXELON CORP</u> [ EXC ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner							
(Last) (First) (Middle) 10 SOUTH DEARBORN STREET					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2011									Officer elow)	(give title		Other (s	specify			
54TH FLOOR					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CHICAGO IL 60603															X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Da Da			2. Transaction Date (Month/Day/Year)		ur) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			and Securiti Benefic Owned		es ally Following	Form:	Direct Indirect Istr. 4)	7. Nature of ndirect Beneficial Ownership			
									Code	v	Amount	(A) o (D)	r Price	Tra	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)		
Common Stock (Deferred Stock Units) 12/31/				1/2011	2011			A		574	A	\$43.	58	8,099(1)		I		By Exelon Directors' Deferred Stock Unit Plan			
Common Stock														5,000		D					
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. Deeme Execution I if any (Month/Day	ed n Date,	4. Transa Code ( 8)	ction	5. Number of		6. Date Ex Expiration (Month/Da	ercisa Date	able and	7. Title an Amount of Securities Underlyin Derivative (Instr. 3 and	d of s g e Security	8. Prio Deriva Secur (Instr.	tive ty	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisab		expiration ate	Title	Amount or Number of Shares								
Deferred Comp. Phantom Shares	(2)								(2)		(2)	Common Stock	967			967 <sup>(3)</sup>		D			

#### **Explanation of Responses:**

- 1. Balance includes 90 shares acquired on 12/09/2011 through the automatic dividend reinvestment feature of Exelon plans.
- 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. Balance includes 12 shares acquired on 12/09/2011 through the automatic dividend reinvestment feature of Exelon plans.

# Remarks:

Scott N. Peters, Esq., Attorney in Fact for John A. Canning, Jr.

01/03/2012

\*\* 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.