FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |

0.5

hours per response:

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* SNODGRASS S GARY | | | | | 2. Issuer Name and Ticker or Trading Symbol EXELON CORP [EXC] | | | | | | (Check | ationship of Reporting k all applicable) Director Officer (give title | | g Per | Person(s) to Issuer 10% Owner Other (specify | | |
|---|--|--|---|---|---|-------|--|--|----------------------------|--|---|--|--|---|---|--|--|
| (Last) (First) (Middle) 10 SOUTH DEARBORN STREET 37TH FLOOR | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/08/2005 | | | | | | X | below | | | below) | | | |
| (Street) CHICAC | | | 60603 (Zip) | 4. li | f Amer | ndmen | t, Date | of Original F | iled (Mont | n/Day/Year) | | 6. Indivi | Form | Joint/Group filed by One filed by More | Rep | orting Perso | n |
| 1. Title of \$ | Security (Inst | | Transaction te onth/Day/Ye | 2. E | A. Deer | med | 3. Transact | 4. Se | curities Acquesed Of (D) (| ired (A) | or and | 5. Amor Securiti | unt of | Form | n: Direct | 7. Nature of Indirect Beneficial | |
| | | | | (Month/Day/Ye | | | <u> </u> | /(A) or | | | Owned Reporte Transac | | | (I) (Instr. 4) | Ownership (Instr. 4) | | |
| | 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. Deemed Execution Date, if any (Month/Day/Year) | Code (| Transaction Code (Instr. | | mber rative rities iired r osed) : 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Amount Securitie Underlyi Derivativ | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | Price of ivative curity etr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | e s illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | n Title | Amou or Numb of Share | er | | | | | |
| Deferred Comp Phantom Shares | (1) | 07/08/2005 | | A | | 15 | | (1) | (1) | Commor Stock | 15 | \$: | 51.61 | 3,073 | | D | |

Explanation of Responses:

Remarks:

Scott N. Peters, Attorney in Fact for S. Gary Snodgrass

07/11/2005

** 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.

^{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.