FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ON	IB APPROVAL	
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OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>Lillie Charisse R</u>						2. Issuer Name and Ticker or Trading Symbol EXELON CORP [EXC]									elationship eck all appli	cable)	Reporting Person(s) to Issuer ble) 10% Owne		
(Last) (First) (Middle) 10 S DEARBORN STREET 54TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2023											er (give title		Other (s below)	
					4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street)	IL	60	603												Form filed by More than One Reporting Person				
(City)	(State	e) (Zi	0)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													d to	
		Table	I - Nor	n-Deriva	tive S	ecu	rities	Acc	uired,	Dis	posed o	f, or B	ene	eficiall	y Owned	i			
Dat				2. Transac Date (Month/Da	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (In 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or . 3, 4 and	5. Amou Securitie Benefici Owned I Reporte	es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code				v	Amount	(A) (D)	or	Price	Transac	Transaction(s) (Instr. 3 and 4)			(111501.4)		
Common Stock (Deferred Stock Units) 06/30					2023				A		758	A		\$40.08	758		I		By Exelon Directors Deferred Stock Unit Plan
Common Stock														7,246			D		
		Tal									sed of, onvertik				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	4. Transaction Code (Instr. 8)		n Number		6. Date E Expiratio (Month/D	n Dat	e	Amoun Securit Underly Derivat	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (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 Exercisal		Expiration Date	Title	C	Amount or Number of Shares					
Deferred Compensation - Phantom Share Equivalents	(1)	06/30/2023			A		25		(1)		(1)	Commo Stock	n	25	\$40.74	3,483 ⁽	1)	D	

Explanation of Responses:

1. Phantom share equivalents acquired in the reporting person's Exelon stock fund account that is part of a multi-fun, non-qualified deferred compensation plan and that will be settled in cash on a 1 for 1 basis upon the termination of the reporting person's service. Balance includes 29 additional share equivalents accrued on May 12, 2023 through automatic dividend reinvestment.

Elizabeth M. Hensen, attorneyin-fact for Charisse R. Lillie <u>07/03/2023</u>

** 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.