FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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* STEINOUR STEPHEN D					2. Issuer Name and Ticker or Trading Symbol <u>EXELON CORP</u> [EXC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
					_											r 10% C				
(Last) (First) (Middle) 10 SOUTH DEARBORN STREET					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2009									Office below	er (give title v)		Other (specify below)			
54TH FL	JOOR 				4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														2		filed by On	e Repo	orting Perso	on	
CHICAC	GO IL		50603		_						Form filed by More than One Reporting Person				orting					
(City)	(Si	tate) (Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Dat			Date	2. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)) or 4 and		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or P	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock (Deferred Stock Units)			09/30	09/30/2009				A		514	A	. 4	548.6 8	3,7	3,788(1)		I	By Exelon Directors' Deferred Stock Unit Plan		
Common Stock															2,1	147(2)		D		
Common Stock														2,126			I	Held by family trusts		
		T							uired, D						Owned					
1. Title of Derivative Security 1. Title of Derivative Security 1. Title of Derivative Security 2. Conversion or Exercise (Month/Day/Year)			ed Date,	4. Transaction Code (Instr		on of		6. Date Exc Expiration (Month/Da	ercisa Date	able and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		ırity	3. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Ame or Nun of Sha	- 1						
Deferred Comp. Phantom Shares	(3)	09/30/2009			A		538		(3)		(3)	Common Stock	5	38	\$49.62	4,555 ⁽⁴	1)	D		

Explanation of Responses:

- $1. \ Balance includes \ 35 \ shares \ acquired \ on \ 09/10/2009 \ through \ the \ automatic \ dividend \ reinvestment \ feature \ of \ Exelon \ plans.$
- 2. Balance includes 23 shares acquired on 09/10/2009 through the automatic dividend reinvestment feature of Exelon plans.
- 3. 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.
- $4. \ Balance includes \ 43 \ shares \ acquired \ on \ 09/10/2009 \ through \ the \ automatic \ dividend \ reinvestment \ feature \ of \ Exelon \ plans.$

Remarks:

Lawrence C. Bachman, Esq., Attorney in Fact for Stephen D. 10/01/2009

** 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.