FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL						
	OMB Number:	3235-0287						
	Estimated average burden							
l	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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

MOLE (Last)	nd Address of RELIZA (Fi TH DEARE	3. D	2. Issuer Name and Ticker or Trading Symbol EXELON CORP [EXC] 3. Date of Earliest Transaction (Month/Day/Year) 12/21/2007										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President								
54TH FLOOR (Street) CHICAGO IL 60603 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ction 2A. Deemed Execution Date				red, [3. Transac Code (Ir 8)				(A) or	5. Amor Securiti	unt of 6. C ies For cially (D) Following (I) (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common					C	Code	v	Amount	ount (A) or (D)		Price	(Instr. 3	Action(s) 3 and 4) 1,117 ⁽³⁾		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. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rities lired r osed) . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	: cisable	Ex Da	piration te	Title	or Nu of	ımber						
Deferred Comp. Phantom Shares	(1)	12/21/2007			A		11		((1)		(1)	Common Stock	n	11	\$82.26	193 ⁽²⁾		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.
- $2.\ Balance\ includes\ 1\ share\ acquired\ on\ 12/10/2007\ through\ the\ automatic\ dividend\ reinvestment\ feature\ of\ Exelon\ plans.$
- 3. Balance includes 5,000 shares of restricted stock, and 97 shares acquired on 12/10/2007 through the automatic reinvestment of dividends. The common stock balance reported on Form 4s filed on 11/07/2007 and 11/27/2007 was inadvertently understated by the 5000 restricted shares; however all other transactional details reported on those forms were correct. The common stock balance was correctly reflected on a Form 4 filed on 08/02/2007.

Remarks:

Scott N. Peters, Attorney in Fact for Elizabeth A. Moler

12/26/2007

** 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.