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
notruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL					
OMB Number:	3235-0287					
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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* GRECO ROSEMARIE B					2. Issuer Name and Ticker or Trading Symbol EXELON CORP [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) 12/31/2008											r (give title		Other (specification)						
541H FL	ITH FLOOR						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	GO 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																								
Date			2. Transa Date (Month/D		ur) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				l and Secu Bene Own		mount of curities neficially ned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount (A) or (D)		Price	Reporte Transac (Instr. 3		tion(s)			(Instr. 4)					
Common Stock (Deferred Stock Units) 12/3				12/31	/2008	2008		A		448		A	\$55.	82 10,		430 ⁽¹⁾		I	By Exelon Directors' Deferred Stock Unit Plan					
Common Stock													2,000		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 if any (Month/Da	Date,	4. Transa Code (I		5. Number of		6. Date Exercisa Expiration Date (Month/Day/Year		ble and 7. T Am Sec Und Der		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own Forr Dire or In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares										
Deferred Comp. Phantom	(2)	12/31/2008			A		630		(2)		(2)	Com		630		55.61	9,243 ⁽³	3)	D					

Explanation of Responses:

- 1. Balance also includes 93 shares acquired on 12/10/2008 through the automatic dividend reinvestment feature of Exelon plans.
- 2. Phantom shares held in a multi-fund deferred compensation account to be settled for cash on a 1:1 basis upon the reporting person's termination of employment for any reason. Shares are acquired through regular periodic contributions and the reinvestment of dividend equivalents.
- 3. Balance also includes 80 shares acquired on 12/10/2008 through the automatic dividend reinvestment feature of Exelon plans.

Remarks:

Lawrence C. Bachman, Esq., Attorney in Fact for Rosemarie 01/02/2009 B. Greco

** 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.