#### FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OWNERSHIP** 

_		
Vashington.	D.C.	20549

# ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

	OMB APPROVAL								
OMB Number: 3235-03									
	Estimated average burden								
	hours per response:	1.0							

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Form 3 Holdings Reported. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 Form 4 Transactions Poported

U romi + manse	actions reported.		or Section 30(h) of the Investment Company Act of 1940								
1. Name and Address of Reporting Person*  ROGERS JOHN W JR			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>EXELON CORP</u> [ EXC ]		ionship of Reporting Pe all applicable) Director	Person(s) to Issuer 10% Owner					
(Last) (First) (Middle) 10 SOUTH DEARBRON STREET 54TH FLOOR		,	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007		Officer (give title below)	Other (specify below)					
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)				X	Form filed by One Re	porting Person					
CHICAGO	IL	60603			Form filed by More th Person	an One Reporting					
(City)	(State)	(Zip)									
		Table I New D	animatica Caramitica Armainad Diamarad of an Damaf	:: -: - II G							

lable I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership	
		(Month/Day/rear)	8)	Amount	(A) or (D)	Price	Issuer's Fiscal Year (Instr. 3 and 4)	Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock (Deferred Shares)							11,800	I	By Exelon Deferred Stock Unit Plan	
Common Stock (Deferred Shares)							3,338	I	By Unicom Deferred Stock Unit Plan	
Common Stock							11,374	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)	of E		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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Deferred Comp Phantom Shares	(1)						(1)	(1)	Common Stock	6,971		6,971 <sup>(1)</sup>	D	

#### **Explanation of Responses:**

1. 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 and the automatic reinvestment of dividends.

## Remarks:

John W. Rogers, Jr

02/11/2008

\*\* 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.