FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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									
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	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* ROWE JOHN W				2. Issuer Name and Ticker or Trading Symbol EXELON CORP [EXC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
															er (give title	е	10% Ow Other (s		
(Last) (First) (Middle) 10 SOUTH DEARBORN STREET 37TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 04/30/2004									A below) below) Chairman and CEO					
(Street) CHICAGO IL 60603					4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individual or Joint/Group Filing (Check Applicable ine) $ X \qquad \text{Form filed by One Reporting Person} $					
(City)	(State	e) (Zi	p)											Form filed by More than One Reporting Person					
		Table	e I - Noi	n-Deriv	ative	Secu	ıritie	s Acq	uired,	Dis	posed of,	or Bene	eficial	ly Owne	d				
Da		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					5) Secur Benef		Form (D) o	: Direct I r Indirect I	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price		ted action(s) 3 and 4)			(Instr. 4)		
Common Sto	ock			05/03				M ⁽¹⁾		17,188	A	\$35	2	21,127		D			
Common Sto	ock			05/03	03/2004				S ⁽¹⁾		17,188	D	\$66.	58	3,939		D		
Common Stock (Deferred Shares)													1	28,926		I 1	By Stock Deferral Plan		
Common Stock (401k Shares)														2,474		I	By 401(k) Plan		
Common Stock															1,750			Held by spouse.	
		Ta									osed of, o			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Executio if any (Month/E		4. Transa Code (I 8)		of Deri Secu Acqu (A) o Disp of (D	umber vative urities uired or oosed o) (Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		ate	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		Derivat Securit	deriva Securi Benefi Owned Follow Report	tive ties cially I ing ted action(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amour or Number of Shares	r					
Deferred Compensation- Phantom Shares	\$66.94	04/30/2004			A 72			(2)		(2)	Common Stock	72	(2)	(2) 13,14		D			
NQ Stock Options - 03/16/1998	\$35.2	05/03/2004			M ⁽¹⁾ 17,188		(3)		(3)	Common Stock	17,18	8 (3)	120),312	D				

Explanation of Responses:

- $1.\ Exercise\ and\ sale\ made\ pursuant\ to\ a\ rule\ 10b5-1\ trading\ plan\ entered\ into\ on\ February\ 3,\ 2004.$
- 2. 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 and the automatic reinvestment of dividends.
- 3. Non-qualified employee stock options, awarded pursuant to the Issuer's Long Term Incentive Plan, vest in 1/3 increments beginning on the first anniversary of the grant date (referenced in column 1) and expire on the tenth anniversary of the grant date.

Remarks:

Scott N. Peters, Esq. Attorney in 05/04/2004 Fact for John W. Rowe

** 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.