FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPI | ROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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 S | ection | 30(n) (| or the ir | nvestment | Cor | npany Act c | of 1940 | | | | | | | |
|---|---|--|---|------------------------------|--|-------------|--------------------------------|-------------------|--|--|---|--|---|---|---------------------------------|--|---|--|
| 1. Name and Address of Reporting Person* STROBEL PAMELA B | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>EXELON CORP</u> [EXC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
| | | | | - | | | | | | | | | Directo Officer below) | r (give title | | Other (s | | |
| (Last) (First) (Middle) 10 SOUTH DEARBORN STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/03/2004 | | | | | | | | Executive Vice President | | | | | |
| 37TH FLO | OR | | | 4 If A | mond | lmont [| Cato of | Original E | ilod | (Month/Day | (Voar) | 6 15 | dividual or J | oint/Croup | Eiling | (Chock Apr | licable | |
| (Street) | | | | _ 4. 11 / | unenu | iiiieiit, L | Jale of | Original F | ileu | (WOTH #Day | n rear) | Line |) | | Ü | ` | | |
| CHICAGO | IL | 60 | 603 | | | | | | | | | ' | · - | • | | rting Persor One Repor | | |
| (City) | (State | e) (Zi _l | 0) | - | | | | | | | | | Person | 1 | | | | |
| | | | · I - Non-Deri | vative | Secu | urities | s Aca | uired. [| Dis | oosed of | f. or Ber | eficiall | v Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date | | | | 2A. Deemed Execution Date | | | 3. Transaction Code (Instr. 5) | | | es Acquired (A) or Of (D) (Instr. 3, 4 an | | 5. Amou Securitie Beneficia Owned F Reported | For lly (D) ollowing (I) (| Form | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Transact (Instr. 3 a | on(s) | | | ,mau. 4) | | |
| | | Та | ble II - Deriv (e.g., | | | | | | | osed of, onvertib | | | Owned | | | , | | |
| 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/Yea | Code | Transaction Code (Instr. | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisab | | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Deferred Compensation - Phantom Shares | (1) | 09/03/2004 | | A | | 27 | | (1) | | (1) | Common Stock | 27 | \$37.35 | 3,811 | | 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 and the automatic reinvestment of dividends.

Remarks:

Scott N. Peters, Esq. Attorney in Fact for Pamela B. Strobel

09/08/2004

** 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.