FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL									
l	OMB Number:	3235-0287								
l	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)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				01 3	ection	30(11) (	JI LITE II	ivesiment	CUI	ilpariy Act C	1 1940								
1. Name and Address of Reporting Person*  JOSKOW PAUL L					2. Issuer Name and Ticker or Trading Symbol EXELON CORP [ EXC ]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
JOSKON	FAULI	<u> </u>											X	Director	r		10% Ow	ner	
(Last) 10 SOUTH		3. Date of Earliest Transaction (Month/Day/Year) 06/30/2010									Officer (give title Other (specify below)								
54TH FLO	OR			4 If A	mond	mont [	Onto of	Original E	ilod	(Month/Day	//Voor)		6 Inc	dividual or J	oint/Croup F	-iling /	Chock App	licablo	
					0/201		Jale UI	Original F	ileu	(MOHUI/Day	// rear)		Line)		Jilli/Gloup F	-IIII (	Cileck App	licable	
(Street)													X	Form fi	led by One I	Repor	ting Person		
CHICAGO	IL	60	603											Form fil Person	led by More	than	One Report	ing	
(City)	(State	e) (Zip	o)																
		Table	I - Non-Deri	vative	Secu	ırities	s Acq	uired, I	Dis	posed of	f, or B	ene	ficially	/ Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Exe r) if a	A. Deemed kecution Date, any lonth/Day/Year)		3. 4. Securities Acquire Disposed Of (D) (Inst 5)					5. Amount of Securities Beneficially Ownerfed		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct I Indirect E tr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)		Price	Transacti (Instr. 3 a	tion(s)			(Instr. 4)	
		Ta	ble II - Deriva (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/Year	Code	Transaction Code (Instr.		rative rities rired r osed ) r. 3, 4	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)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisable		Expiration Date	Title	O N O	lumber						
Deferred Compensation	(1)							(1)		(1)	Commo	on 2	4.898		4.898 <sup>(2)(3</sup>	3)	D		

## **Explanation of Responses:**

- 1. 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.
- 2. Balance includes 63 shares acquired on 06/10/2010 through the automatic dividend reinvestment feature of Exelon plans.
- 3. Prior report filed on 6/30/2010 included an aquisition of phantom shares. However, the reporting person had submitted a prior election to the plan administrator to allocate the deferred compensation amounts into another fund within the deferred compensation plan; so there is no acquisition of phantom shares to report.

## Remarks:

- Phantom

Scott N. Peters, Esq., Attorney in Fact for Paul L. Joskow

Stock

07/01/2010

\*\* 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.