## FORM 5

Check this box if no longer subject to

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

#### **OMB APPROVAL** OMB Number: ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

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.

**OWNERSHIP** 

Form 4	Transactions	Reported.	Fil	ed pursuant to or Section					curities Excha Company Ad		of 1934							
1. Name and Address of Reporting Person*  SHAPARD ROBERT S				2. Issuer Name and Ticker or Trading Symbol EXELON CORP [ EXC ]								ck all app	licable)		erson(s) to Issuer  10% Owner  Other (speci		ner	
(Last) (First) (Middle) 10 SOUTH DEARBORN STREET, 37TH FLOOR					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2003								below	/)	below)		) (w	
(Street) CHICAC			60603 (Zip)	4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. T		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution I if any	2A. Deemed Execution Date,		te, Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			1		nt of es ally	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial		
				(WOIIIII/Day	/ rear j	8,	8)		ount	(A) or (D) Price			Issuer's	Issuer's Fiscal Year (Instr. 3 and		ect (I) :. 4)	Ownership (Instr. 4)	
Common	Stock												16,427(1)		D			
Common	Common Stock (Deferred Shares)									636(2)		6(2)	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) 5. Number of Expiration (Month/Day Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ion Da					Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s dly	10. Ownersh Form: Direct (D or Indire (I) (Instr.	nip	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	r						
Deferred Comp Phantom Shares	(3)						(3)		(3)	Commor Stock	259			259	9 D			
NQ Stock Options 10-21- 2002	\$49						(4)		(4)	Commor Stock	20,000			20,000		0 D		
NQ Stock Options	\$49.61						(5)		(5)	Commor	36,000			36,00	0	D		

## **Explanation of Responses:**

- $1.\ Includes\ 47\ shares\ acquired\ on\ 03/10/2003,\ 06/10/2003,\ 09/10/2003\ and\ 12/10/2003\ through\ the\ automatic\ dividend\ reinvestment\ feature\ of\ Exelon\ plans.$
- 2. Includes 21 shares acquired on 03/10/2003, 06/10/2003, 09/10/2003 and 12/10/2003 through the automatic dividend reinvestment feature of Exelon plans.
- 3. Shares held as of 12/31/2003 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.
- 4. Non-qualified stock options vest in 1/3 increments on the first three anniversaries of the grant date (referenced in Column 1) and expire ten years from the grant date unless terminated earlier under the terms of the option plan or grant.
- 5. Non-qualified stock options vest in 1/4 increments on the first four anniversaries of the grant date (referenced in Column 1) and expire ten years from the grant date unless terminated earlier under the terms of the option plan or grant.

## Remarks:

01-27-

2003

Robert S. Shapard

\*\* Signature of Reporting Person

Stock

02/09/2004

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.