## Edgar Filing: EXELON CORP - Form 4

EXELON COL	RP									
Form 4										
December 26,	2007									
FORM	4		~~ ~~ ~			~~~			PPROVAL	
	UNITED	STATES		RITIES A shington			COMMISSIO	N OMB Number:	3235-0287	
Check this if no longer subject to Section 16. Form 4 or Form 5 obligations	Filed pur Section 17(	<b>MENT OF</b> rsuant to So (a) of the P	ection 1	SECUE	Estimated burden hou response	urs per				
may contin <i>See</i> Instruct 1(b).		30(h) c	of the II	nvestment	Compar	y Act of 1	940			
(Print or Type Res	sponses)									
1. Name and Address of Reporting Person <u>*</u> CLARK FRANK M			2. Issuer Name <b>and</b> Ticker or Trading Symbol EXELON CORP [EXC]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (		3. Date of Earliest Transaction				(Check all applicable)			
10 SOUTH D STREET, 541	EARBORN			Day/Year)	Tansaction		Director X Officer (gi below) Chairma		% Owner ner (specify ComEd	
			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
CHICAGO, II	L 60603						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
	Transaction Date Ionth/Day/Year)	2A. Deemed Execution I any (Month/Day	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Pamindan Danar	t on a senarata line	for each als	ss of som				or indirectly			
Kenninder: Kepor	t on a separate line	e for each cla	55 01 Sec	unues dene:	Perso inform requir	ns who rest nation cont ed to resp ys a curre	spond to the collection and in this form and unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Date	Underlying Securities	Derivative
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Securities Acquired (A) or	Disposed of (D) (Instr. 3,				(Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Comp. Phantom Shares	<u>(1)</u>	12/21/2007	А	36	(1)	(1)	Common Stock	36	\$ 82.26

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CLARK FRANK M 10 SOUTH DEARBORN STREET 54TH FLOOR CHICAGO, IL 60603			Chairman and CEO of ComEd				
Signatures							
Scott N. Peters, Attorney in Fact for Clark	Frank M.		12/26/2007				
<u>**</u> Signature of Reporting Person			Date				
<b>Explanation of Respo</b>	onses	S:					

- \* 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).

Phantom shares held in a multi-fund deferred compensation plan to be settled for cash upon the reporting person's termination of

- (1) employment for any reason on a 1:1 basis. Shares are acquired through regular periodic contributions, company matching contributions, and the automatic reinvestment of dividends.
- (2) Balance includes 3 shares acquired on 12/10/2007 through the automatic dividend reinvestment feature of Exelon plans.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.