FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 OMB Number: Estimated average burden 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* RESHESKE FRANCES						2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ED]									ck all applic	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner		
(Last) (First) (Middle) CONSOLIDATED EDISON COMPANY OF NY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 08/10/2010									below)		olic A	below)	pechy		
4 IRVING PLACE; ROOM 1618-S						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW YORK NY 10003																X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																					
		Tab	le I - Noi	n-Deri	vativ	e Se	curi	ties Ac	quired	, Dis	sposed o	of, or	Bene	ficially	y Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D								2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					5. Amou Securitie Benefici Owned F	es	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A)	A) or ())	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 08/1						0/2010					15,00	000 A \$		\$42.51	30,7	30,701.69		D			
Common Stock 08/10					0/201)/2010					15,00	15,000		\$40.81	45,7	45,701.69		D			
Common Stock 08/10					0/201)/2010					30,00	0	D	\$48.4(1	15,7	01.69		D			
Common Stock															95	956.86		I	By THRIFT PLAN		
		-	Гable II -								osed of converti				Owned		,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr 8)		of Deri Sec Acq (A) Disj	umber ivative urities uired or oosed D) (Instr. and 5)	6. Date I Expirati (Month/I	n Da		of Sec Under	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	O N O	umber							
Employee Stock Option (Right to Buy)	\$42.51	08/10/2010			М			15,000	04/18/2	005	04/18/2012	Comn		5,000	\$0	0		D			
Employee Stock Option (Right to	\$40.81	08/10/2010			M			15,000	01/23/2	006	01/23/2013	Comn		5,000	\$0	0		D			

Explanation of Responses:

1. Represents the weighted average sale price of the shares of Consolidated Edison, Inc. (the "Company") common stock sold by Ms. Resheske. The shares were sold in multiple transactions at prices ranging from \$48.36 to \$48.44, inclusive. The reporting person will provide the Company, any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the numbers of shares purchased at each separate price within the ranges set forth in this footnote (1) to this Form 4.

Remarks:

Carole Sobin; Attorney-in-Fact 08/11/2010

** 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.