SEC Form 4

Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

IN BENEFICIAL	OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0287
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 [*] Ivey Craig S			2. Issuer Name and Ticker or Trading Symbol <u>CONSOLIDATED EDISON INC</u> [ED]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					Director	10% Owner				
		(11)		X	Officer (give title below)	Other (specify below)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		President (CECONY)					
CONSOLIDATED EDISON COMPANY OF NY, INC.			02/17/2016							
4 IRVING PLA	ACE, ROOM 14	450-S								
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	idual or Joint/Group Filin	g (Check Applicable Line				
NEW YORK	NY	10003		X	Form filed by One Rep	porting Person				
					Form filed by More that	an One Reporting Person				
(City)	(State)	(Zip)								

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Disposed Of (D) (Instr. 3, 4 and 5) ode (Instr.		Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	02/17/2016		М		34,353	A	(1)	73,226.44	D		
Common Stock	02/17/2016		D		34,353	D	\$70.97	38,873.44	D		
Common Stock								943.16	Ι	By THRIFT PLAN	

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. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount 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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Performance Units (Phantom Stock)	(2)	02/17/2016		Α		32,200		(3)	(3)	Common Stock	32 , 200 ⁽⁴⁾	(1)	32,200 ⁽⁴⁾	D	
Performance Restricted Stock Units (Phantom Stock)	(2)	02/17/2016		М			34,353	02/17/2016	02/17/2016	Common Stock	34,353 ⁽⁵⁾	(1)	0	D	

Explanation of Responses:

1. Not applicable.

2. Each Performance Unit and Performance Restricted Stock Unit is the economic equivalent of one share of Consolidated Edison, Inc. (the "Company") common stock.

3. Performance Units granted under the Company's Long Term Incentive Plan ("LTIP"), will vest in 2019 when they are determined and awarded by the Management Development and Compensation Committee of the Company's Board of Directors.

4. The number of shares (or cash equivalents) will be adjusted based on certain performance criteria, including criteria other than the market price, as specified under the LTIP.

5. The number of shares (or cash equivalents) were adjusted based on certain performance criteria, including criteria other than the market price, as specified under the LTIP.

Remarks:

Jeanmarie Schieler; Attorney-in-02/19/2016

Date

** Signature of Reporting Person

Fact

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See