FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APF	ROVAL
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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 or Section 30(h) of the Investment Company Act of 1940

							` '											
1. Name and Address of Reporting Person*  HOGLUND ROBERT N						2. Issuer Name <b>and</b> Ticker or Trading Symbol CONSOLIDATED EDISON INC [ ED ]								5. Relationship of Reporting Person(s) to Issue Check all applicable) Director 10% Owr V Officer (give title Other (sp				
	(Last) (First) (Middle) CONSOLIDATED EDISON, INC. 4 IRVING PLACE, ROOM 1618-S						3. Date of Earliest Transaction (Month/Day/Year) 01/19/2006								Officer (give title below)  Senior Vice Pre			респу
(Street) NEW YORK NY 10003  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tabl	le I - N	lon-Deriv	ative/	Sec	urities	Ac	quired	l, Di	sposed of	f, or Ber	neficially	/ Owned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day.				Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar		A) or 3, 4 and 5)	Securitie Beneficia Owned F	Securities Beneficially Dwned Following		: Direct   I r Indirect   I str. 4)   (	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ction(s)			(Instr. 4)		
Common Stock 01/19/20				2006	)06		A		50.3159(2)	A	\$46.005	6 30,05	0.3159		D			
		Т	able II								posed of, convertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)				6. Date Exe Expiration I (Month/Day		ate	7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares	mber				
Performance Based Restriced Stock Units <sup>(3)</sup>	(4)	01/19/2006			A		3,000		01/19/2	2009	01/19/2009	Common Stock	3,000	(1)	3,000 <sup>()</sup>	5)	D	
Stock Option (Right to	\$46.88	01/19/2006			A		25,000		01/19/2	2009	01/19/2016	Common Stock	25,000	(1)	25,000	0	D	

## **Explanation of Responses:**

- 1. Not Applicable
- 2. Shares acquired under Con Edison's Stock Purchase Plan based on a plan statement as of 01/19/2006.
- 3. Performance Based Restricted Stock Units ("PBRS") granted under the Consolidated Edison, Inc. Long Term Incentive Plan -- the restricted stock units will vest in 2009.
- 4. PBRS (phantom stock) are converted into common stock on a 1 for 1 basis.
- 5. The number of shares (or cash equivalents) will change based on certain performance criteria, including criteria other than the market price, specified under the Consolidated Edison, Inc. Long Term Incentive Plan

## Remarks:

Peter J. Barrett; Attorney-in-

01/23/2006

**Fact** 

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.