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 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* FREILICH JOAN S					2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ED]								ck all application	able)		Owner	
(Last) (First) (Middle) CONSOLIDATED EDISON, INC. C/O SECRETARY 4 IRVING PLACE; ROOM 1618-S					3. Date of Earliest Transaction (Month/Day/Year) 02/12/2004							>	X Officer (give title Other (specify below) Executive Vice President & CFO				
+ IKVING PLACE, ROOM 1010-3					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) NEW YORK NY 10003													X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					Execution D			3. Transa Code (I 8)	action Disposed		ies Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amoun Securities Beneficia Owned Fo Reported	s Fo ally (D ollowing (I)	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)		
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				6. Date Exercisal Expiration Date (Month/Day/Year)		able and 7. Title and of Securitie		d Amount es J Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership t (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Performance Based Restricted Stock Units ⁽¹⁾	(2)	02/12/2004		A		16,000		01/01/20	06	01/02/2006	Common Stock	16,000	\$0	16,000 ⁽³	3) D		
Performance Based Restricted Stock Units ⁽⁴⁾	(2)	02/12/2004		A		16,000		01/01/20	06	01/02/2006	Common Stock	16,000	\$0	16,000 ⁽³	3) D		
Performance Based Restricted Stock	(2)	02/12/2004		A		17,000		01/01/20	07	01/02/2007	Common Stock	17,000	\$0	17,000 ⁽³	3) D		

Explanation of Responses:

- 1. Performance Based Restricted Stock Units ("PBRS") granted under the Consolidated Edison Long Term Incentive Plan -- the restricted stock units will vest in 2006.
- 2. PBRS (phantom stock) are converted into common stock on a 1-for-1 basis.
- 3. The number of shares (or cash equivalents) is subject to change based on the achievement of certain performance criteria specified under the Consolidated Edison, Inc. Long Term Incentive Plan.
- 4. PBRS granted under the Consolidated Edison Long Term Incentive Plan -- the restricted stock units will vest in 2006.
- 5. PBRS granted under the Consolidated Edison Long Term Incentive Plan -- the restricted stock units will vest in 2007.

Remarks:

Peter J. Barrett; Attorney-in-02/17/2004 **Fact**

** 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.