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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

1. Name and Address of Reporting Person [*] Shukla Saumil P			2. Issuer Name and Ticker or Trading Symbol <u>CONSOLIDATED EDISON INC</u> [ED]		ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner		
				x	Officer (give title	Other (specify below)	
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	,	
CONSOLIDATED EDISON, INC. C/O SECRETARY			02/14/2018		SVP, Utility Shared Services		
4 IRVING PLACE, ROOM 16-205		6-205					
,			4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable			
(Street)				Line)			
NEW YORK	NY	10003		X	Form filed by One Rep	orting Person	
					Form filed by More tha Person	n One Reporting	
(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)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr.	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		4)	
Common Stock	02/14/2018		М		3,504	A	(1)	8,494.22	D		
Common Stock	02/14/2018		D		3,504	D	\$77.03	4,990.22	D		
Common Stock								25.53	I	By THRIFT PLAN	
Common Stock								1,242.37	I	By TAX REDUCTION ACT STOCK OWNERSHIP PLAN (TRASOP)	

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

(c.g., puts, cans, 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 Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/)	ate	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)	02/14/2018		Α		3,900		(3)	(3)	Common Stock	3,900 ⁽⁴⁾	(1)	3,900 ⁽⁴⁾	D	
Performance Units (Phantom Stock)	(2)	02/14/2018		М			3,504	02/14/2018	02/14/2018	Common Stock	3,504 ⁽⁵⁾	(1)	0	D	

Explanation of Responses:

1. Not applicable.

2. Each Performance 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 2021 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:

Vanessa M. Franklin; Attorneyin-Fact 02/16/2018

** 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.