FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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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

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Ryan JoAnn F						2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ED]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					- -	Date of Earliest Transaction (Month/Day/Year)									rector ficer (low)		10% Owner give title Other (specify below)				
(Last) (First) (Middle) CONSOLIDATED EDISON, INC. C/O SECRETARY 4 IRVING PLACE, ROOM 1618-S						2012	Transa	action (iv	/IOHIH	Day/ fear)		S	SVP, Business Shared Services				ces				
(Street)				_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
NEW YO	RK NY	·	10009		-											ed by More than One Re		•			
(City)	(Sta		Zip)																		
		Tak	ole I - No	on-Deri	vativ	e S	ecurities	s Ac	quired	l, Di	sposed o			lly Owr	ed						
			2. Transa Date (Month/D		r) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transactio Code (Inst					and 5) Securities Beneficiall Owned Fol		,	6. Owne Form: D (D) or Ir (I) (Insti	Direct ndirect	7. Nature of Indirect Beneficial Ownership			
					(,		Code	v	Amount	(A) or (D) Price		Trans	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common S	Stock			02/15	/2012		02/21/20)12	M		15,774	A	(1)	33	31,884.86		36 D				
Common S	Stock			02/15	/2012		02/21/20)12	F		6,361	D	\$57.9	97 25	25,523.86		5 D				
Common S	ommon Stock												1	1,741.67		I		Tax Reduction Act Stock Ownership Plan (TRASOP)			
Commmon	Commmon Stock											833.47		I		By THRIFT Plan					
			Table II								oosed of			y Owne	d						
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution or Exercise (Month/Day/Year) if any		3A. Deem Executior if any (Month/Da	ned 4. Transact Code (In		ction	5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Deriv Security (Instr. 3		Deriv			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title		mount or umber of hares							
Performance Restricted Stock Units (Phantom Stock)	(2)	02/17/2012			A		7,300		(3)		(3)	Common Stock	7,300	(4)	(1) 7,		7,300 ⁽⁴⁾				
Performance Restricted Stock Units (Phantom Stock)	(2)	02/15/2012	02/21/	2012	М		15,774		02/15/20	012	02/15/2012	Common Stock	15,774	4 (5) (1)	0		D			

Explanation of Responses:

- 1. Not Applicable.
- $2.\ Each\ Performance\ Restricted\ Stock\ Unit\ ("PRSU")\ is\ the\ economic\ equivalent\ of\ one\ share\ of\ Consolidated\ Edison,\ Inc.\ ("Company")\ common\ stock.$
- 3. PRSUs granted under the Company's Long Term Incentive Plan (the "LTIP") will vest in 2015 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, specified under the LTIP.

Remarks:

02/21/2012 Carole Sobin; Attorney-in-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.