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

| 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

| Name and Address of Reporting Person* <u>CAMPBELL GEORGE JR</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ED] | | | | | | | | (Che | eck all app | olicable) ctor | g Person(s) to Issuer 10% Owner | |
|---|--|----|---------|---|---|--|--|--|------|--|-----------------------------------|---|------|--|--|---|---|--|
| | OPER UNI | ON | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/19/2008 | | | | | | | | | Offic belov | er (give title v) | Othe below | r (specify v) |
| 7 EAST 7TH STREET; 7TH FLOOR (Street) NEW YORK NY 10003 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | dividual or Joint/Group Filing (Check Applicable) Compared to the compared t | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | | | Executi Day/Year) if any | | xecution any | Deemed ecution Date, any onth/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securiti Disposed 5) | | | | | Securi Benef | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | Price | Transa | action(s) 3 and 4) | | (|
| Common Stock 0 | | | | | 9/2008 | | | | A | | 54.020 |) A \$41.6 | | \$41.6 | .65 18,464.46 | | D | |
| Common | Common Stock 05/19 | | | | | /2008 | | | A | | 1,500 | 2) | A | (2) | 20,167.87 ⁽³⁾ | | D | |
| | 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) | Derivative Security Conversion Date Security Or Exercise (Month/Day/Year) Execution Da | | | | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) of Dispo of (D) (Instr | of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | r. 3 | Price of erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code | v | (A) | (D) | Date Exercisa | Date Expiration Exercisable Date | | Title | Amou or Numl of Share | er | | | | | | |

Explanation of Responses:

- 1. Deferred Stock Units ("DSU") acquired pursuant to a voluntary deferral of meeting fees in accordance with Consolidated Edison, Inc. (the "Company") Long Term Incentive Plan (the "Plan"). Each DSU represents one share of the Company's common stock.
- 2. DSUs granted pursuant to the Company's Plan.
- 3. Total includes 168.17 DSUs acquired pursuant to the Plan's dividend reinvestment provision and 35.24 shares acquired pursuant to the Company's Automatic Dividend Reinvestment and Cash Payment Plan.

Remarks:

Peter J. Barrett; Attorney-in-Fact

05/21/2008

** 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.