FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington	ı. D.C.	20549

OMB APPROVAL									
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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

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*  Nadkarni Gurudatta D						2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ ED ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) CONSOLIDATED EDISON, INC. C/O SECRETARY 4 IRVING PLACE, ROOM 16-205						3. Date of Earliest Transaction (Month/Day/Year) 02/17/2021								Officer (give title Other (sp below)  VP, Strategic Planning				респу	
(Street) NEW YOL	RK NY		0003 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Non	-Deriv	ative	e Se	curitie	s Acc	uired.	Dis	posed of	. or Ben	eficially	Owned					
1. Title of Security (Instr. 3) 2. To Date			2. Trans Date (Month/		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Se Transaction Code (Instr.			es Acquirec Of (D) (Instr		or 5. Amount Securities Beneficiall Owned Fol		Form:	Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	ion(s)			(	
Common Stock 02/1					7/2021		M		1,201	1,201 A		9,121.974		D					
Common Stock 02/1				02/17	7/2021		D		1,201 D \$		\$70.05	7,920.974			D				
			Fable II - [								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transactior Code (Instr. 8)		n Derivative		6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and of Security Underlying Derivative (Instr. 3 and	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
					Code	v			Date Exercisable		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Performance Units (Phantom Stock)	(2)	02/17/2021			A		3,000		(3)		(3)	Common Stock	3,000(4)	(1)	3,000(4	4)	D		
Performance Units (Phantom	(2)	02/17/2021			М			1,201	02/17/2	021	02/17/2021	Common Stock	1,201(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 2024 when they are determined and awarded by the Management Development and Compensation Committee of
- 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

02/19/2021

\*\* 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.