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
   Nachmias Stuart
   (Last) (First) (Middle)
   CONSOLIDATED EDISON, INC. C/O SECRETARY
   4 IRVING PLACE, ROOM 16-205
   (Street)
   NEW YORK NY 10003
   (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
   CONSOLIDATED EDISON INC [ ED ]

3. Date of Earliest Transaction (Month/Day/Year)
   05/31/2023

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
   Director
   10% Owner X
   Officer (give title below)
   President & CEO CET
   Other (specify below)

Rule 10b5-1(c) Transaction Indication

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Deemed Execution Date, if any (Month/Day/Year)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>05/31/2023</td>
<td></td>
<td>P</td>
<td>7.145 (1)</td>
<td>3,261,998</td>
<td>D</td>
<td>V</td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. Purchase of shares of common stock of Consolidated Edison, Inc. (the "Company") under the Company's Stock Purchase Plan.

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).


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.

William J. Kelleher; Attorney-in-Fact

06/06/2023

** Signature of Reporting Person Date

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