FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 Estimated average burden

hours per response:

0.5

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 OATES		2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ ED ]									(Che	5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Own X Officer (give title Other (sp				ner			
(Last) (First) (Middle) CONSOLIDATED EDISON COMPANY OF NY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/20/2013									below)		Share	below) d Services	´
4 IRVING PLACE, ROOM 1618-S  (Street)  NEW YORK NY 10003							4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta		<sup>Zip)</sup> ole I - Nor	-Deriva	ative	Se	curitie	es Acq	uired,	Dis	osed of	, or	Bene	ficially	Owned				
1. Title of Security (Instr. 3)  2. Trans. Date					/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect B	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				nstr. 4)
Common Stock 02/20							)/2013		М		4,792		A	(1)	19,611.4			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, T	4. Transaction Code (Instr. 8)		Deriva Secur Acqui	ative ities red (A) posed (Instr.	6. Date Exercisal Expiration Date (Month/Day/Year)		е	of Securities		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Owners Form: Direct ( or Indir	Ownership	Beneficial Ownership ct (Instr. 4)
					ode	.,	(A)	(D)	Date		Expiration	Title		Amount or Number of		Transacti (Instr. 4)	on(s)		

## **Explanation of Responses:**

(2)

(2)

1. Not Applicable.

Performance Restricted Stock Units

(Phantom Stock) Performance Restricted

Stock Units (Phantom Stock)

2. Each Performance Restricted Stock Unit ("PRSU") is the economic equivalent of one share of Consolidated Edison, Inc. ("Company") common stock.

A

M

3. PRSUs granted under the Company's Long Term Incentive Plan (the "LTIP") will vest in 2016 when they are determined and awarded by the Management Development and Compensation Committee of the Company's Board of Directors

4,792

(3)

02/20/2013

(3)

02/20/2013

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.

6,500

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:

Carole Sobin; Attorney-in-Fact 02/22/2013

\*\* Signature of Reporting Person

6,500(4)

4,792(5)

Stock

(1)

(1)

6.500<sup>(4)</sup>

0

D

D

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).

02/20/2013

02/20/2013

\*\* 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.