FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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** 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*     Saegusa Yukari						2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ ED ]								ck all applica Director	,		n(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) CONSOLIDATED EDISON, INC. 4 IRVING PLACE, ROOM 16-205						3. Date of Earliest Transaction (Month/Day/Year) 02/19/2020								X Officer (give title Offier (specify below)  Vice President and Treasurer				
(Street) NEW YORK NY 10003 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) 02/21/2020								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - No	n-Deri	vativ	e Se	curitie	s Acc	μired,	Dis	posed of	f, or Ben	eficially	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)			es Acquired Of (D) (Instr		Securities Beneficial Owned Fo		Form:	Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	tion(s)			Instr. 4)
Common Stock 02/19.						2020			М		2,122	A	(1)	2,508			D	
Common Stock 02/19,						2020		F		671	671 D		1,8	1,837		D		
		-									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/Da	Date,	4. Transaction Code (Instr. 8)		Derivative		6. Date I Expiration (Month/I	on Da			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficies Owned Following Reported	e s ully	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(A) (D)		able	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Performance Units (Phantom Stock)	(2)	02/19/2020			A		2,300		(3)		(3)	Common Stock	2,300(4)	(1)	2,300 <sup>0</sup>	(4)	D	
Performance Units (Phantom	(2)	02/19/2020			M			2,122	02/19/2	020	02/19/2020	Common Stock	2,122 <sup>(5)</sup>	(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 2023 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 Company Long Term Incentive Plan.

## Remarks:

Vanessa M. Franklin; Attorney-02/25/2020 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.