CONSOLIDATED EDISON INC

Form 4

January 11, 2006

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Section 16.

January 31, Expires: 2005

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OMB APPROVAL

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading RESHESKE FRANCES Issuer Symbol CONSOLIDATED EDISON INC (Check all applicable) [ED] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Other (specify X_ Officer (give title (Month/Day/Year) below) CONSOLIDATED EDISON 01/09/2006 Senior VP Public Affairs COMPANY OF NY, INC., 4 **IRVING PLACE**; ROOM 1618-S (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year)

NEW YORK, NY 10003

X Form filed by One Reporting Person Form filed by More than One Reporting Person

Applicable Line)

(City)	(State)	(Zip) Tab	le I - Non-	Derivative S	Securi	ties Acquir	ed, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securitie ord Disposed (Instr. 3, 4	d of (Ľ))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	01/09/2006		M	979.024	A	<u>(1)</u>	1,757.668	D	
Common Stock	01/09/2006		J(2)	979.024	D	\$ 46.575	778.644	D	
Common Stock							131.495	I	THRIFT

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Ni	imber of	6. Date Exercis	sable and	7. Title and A	Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Expiration Date		Underlying Securities		
Security	or Exercise		any	Code	Securities		(Month/Day/Year)		(Instr. 3 and 4)	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acqu	ired (A) or				
	Derivative				Disp	osed of (D)				
	Security				(Inst	r. 3, 4, and				
					5)					
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
EIP Stock	<u>(3)</u>	01/09/2006		M		979.024 (4)	01/01/2006	01/01/2006	Common Stock	979.02 (4)

Reporting Owners

Reporting Owner Name / Address	Retutioniships						
	Director	10% Owner	Officer	Other			

RESHESKE FRANCES
CONSOLIDATED EDISON COMPANY OF NY, INC.
4 IRVING PLACE; ROOM 1618-S
NEW YORK, NY 10003

Senior VP Public Affairs

Relationshins

Signatures

Peter J. Barrett; Attorney-in-Fact

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Not Applicable.
- (2) Equivalent stock units (phantom stock) cash out pursuant to the terms of the Consolidated Edison Company of New York, Inc. Executive Incentive Plan, based on plan statement received 01/09/06.
- (3) Equivalent stock units are converted into common stock on a 1- for -1 basis.
- (4) Includes shares acquired pursuant to the dividend reinvestment provisions of the Executive Incentive Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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