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HOGLUND	ROBERT N										
Form 4											
April 07, 201											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287	
Check thi			v v ee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Dici2 0					January 31,	
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires:	2005		
subject to Section 1		SECURITIES					Estimated average burden hours per				
Form 4 or	r								response 0.5		
Form 5 obligation	*						U	e Act of 1934,			
may cont				•	•	· ·		1935 or Section	1		
See Instru	uction	30(h)	of the In	vestment	Compan	y Ac	t of 194	.0			
1(b).											
(Print or Type F	Responses)										
1. Name and A	2. Issuer	r Name and	Ticker or	Tradii	ng	5. Relationship of Reporting Person(s) to					
HOGLUND	Symbol					Issuer					
CONSOLIDATED EDISON INC					NC	(Check all applicable)					
			[ED]							, 	
(Last)	(First) (M	/liddle)		f Earliest Tr	ansaction			Director X Officer (give		Owner er (specify	
CONSOLIDATED EDISON,			(Month/Day/Year)					below)	below)	I (speeny	
	ING PLACE, RC		03/31/2	011				S	VP & CFO		
1618-S	into i Linel, Re	/01/1									
	(Street)		4 If Ame	ndment Da	te Origina			6 Individual or Io	int/Group Filin	og(Check	
(Succe)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
					,			_X_ Form filed by One Reporting Person			
NEW YORI	K, NY 10003							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6. Ownership		
Security	(Month/Day/Year)		n Date, if						Form: Direct		
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)				•		Beneficial Ownership	
		(uj, _ cui)		(1.001,0)			Following		(Instr. 4)		
						(A)		Reported			
				a 1 b		or	D.	Transaction(s) (Instr. 3 and 4)			
Common				Code V		(D)	Price ¢	,			
Common Stock	03/31/2011	04/05/2	011	Р	92.25 (1)	А	ъ 49.83	33,558.66	D		
Stork					_		17.05				

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

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 control number.

 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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	Date	Amou Under Secur	le and ant of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
HOGLUND ROBERT N CONSOLIDATED EDISON, INC. 4 IRVING PLACE, ROOM 1618-S NEW YORK, NY 10003			SVP & CFO					
Signatures								
Carole Sobin; Attorney-in-Fact	04/07/201	1						

Date

<u>**</u>Signature of Reporting Person

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) Purchase of shares of common stock of Consolidated Edison, Inc. (the "Company") under the Company's Stock Purchase 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.