

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
 a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report
 an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program
 special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II	Basic Plan Information—enter all requested information
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1a Name of plan <u>EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN</u>	1b Three-digit plan number (PN) ▶ <u>509</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>EXELON CORPORATION</u> <u>FELICIA CUMMINGS</u> <u>10 S. DEARBORN ST., 51ST FLOOR</u> <u>CHICAGO, IL 60603</u>	1c Effective date of plan <u>01/01/1976</u> 2b Employer Identification Number (EIN) <u>23-2990190</u> 2c Plan Sponsor's telephone number <u>779-231-3185</u> 2d Business code (see instructions) <u>221100</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2025	FELICIA CUMMINGS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	32097
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	19952
	6a(2)	20019
	6b	11837
	6c	
	6d	31856
	6e	
	6f	
	6g(1)	
6g(2)		
6h		
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:
4B 4U

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input checked="" type="checkbox"/> General assets of the sponsor	(4) <input checked="" type="checkbox"/> General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules		b General Schedules	
(1) <input type="checkbox"/> R (Retirement Plan Information)		(1) <input checked="" type="checkbox"/> H (Financial Information)	
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary		(2) <input type="checkbox"/> I (Financial Information – Small Plan)	
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		(3) <input checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u>2</u>	
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____		(4) <input checked="" type="checkbox"/> C (Service Provider Information)	
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)		(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)	
		(6) <input type="checkbox"/> G (Financial Transaction Schedules)	

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN		B Three-digit plan number (PN) ▶ 509
C Plan sponsor's name as shown on line 2a of Form 5500 EXELON CORPORATION		D Employer Identification Number (EIN) 23-2990190

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
HARTFORD LIFE AND ACCIDENT

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0838648	70815	ADDS08000	8117	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 25678
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
STRATEGIC NON-MEDICALSOLUTIONS, LLC **1 BEACON ST STE 1700 BOSTON, MA 02108**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	25678	BONUS PAID	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

e Type of contract: (1) individual policies (2) group deferred annuity
 (3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) deposit administration (2) immediate participation guarantee
 (3) guaranteed investment (4) other ▶

b Balance at the end of the previous year **7b**

c Additions: (1) Contributions deposited during the year **7c(1)**
 (2) Dividends and credits..... **7c(2)**
 (3) Interest credited during the year..... **7c(3)**
 (4) Transferred from separate account **7c(4)**
 (5) Other (specify below)..... **7c(5)**
 ▶

(6) Total additions **7c(6)**

d Total of balance and additions (add lines **7b** and **7c(6)**) **7d**

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)**
 (2) Administration charge made by carrier..... **7e(2)**
 (3) Transferred to separate account **7e(3)**
 (4) Other (specify below)..... **7e(4)**
 ▶

(5) Total deductions **7e(5)**

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f**

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) **▶ ACCIDENTAL DEATH & DISMEMBERMENT**

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)	1266975	
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	1266975
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN		B Three-digit plan number (PN) ▶ 509
C Plan sponsor's name as shown on line 2a of Form 5500 EXELON CORPORATION		D Employer Identification Number (EIN) 23-2990190

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
HARTFORD LIFE AND ACCIDENT

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0838648	70815	675835G/402357G	31856	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 403678
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
STRATEGIC NON-MEDICALSOLUTIONS, LLC **1 BEACON ST STE 1700 BOSTON, MA 02108**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	403678	BONUS PAID	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

e Type of contract: (1) individual policies (2) group deferred annuity
 (3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

- a** Type of contract: (1) deposit administration (2) immediate participation guarantee
 (3) guaranteed investment (4) other ▶

b Balance at the end of the previous year			7b	
c Additions: (1) Contributions deposited during the year	7c(1)			
	7c(2)			
	7c(3)			
	7c(4)			
	7c(5)			
(6) Total additions			7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))			7d	
e Deductions:				
	7e(1)			
	7e(2)			
	7e(3)			
	7e(4)			
(5) Total deductions			7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....			7f	

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) **▶ AD&D**

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)	20930240
	(2) Increase (decrease) in amount due but unpaid	9a(2)	
	(3) Increase (decrease) in unearned premium reserve	9a(3)	
	(4) Earned ((1) + (2) - (3))	9a(4)	20930240
b	Benefit charges (1) Claims paid	9b(1)	
	(2) Increase (decrease) in claim reserves	9b(2)	
	(3) Incurred claims (add (1) and (2))	9b(3)	0
	(4) Claims charged	9b(4)	
c	Remainder of premium: (1) Retention charges (on an accrual basis) --		
	(A) Commissions	9c(1)(A)	
	(B) Administrative service or other fees	9c(1)(B)	
	(C) Other specific acquisition costs	9c(1)(C)	
	(D) Other expenses	9c(1)(D)	
	(E) Taxes	9c(1)(E)	
	(F) Charges for risks or other contingencies	9c(1)(F)	
	(G) Other retention charges	9c(1)(G)	
	(H) Total retention	9c(1)(H)	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)	9c(2)	
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement	9d(1)	
	(2) Claim reserves	9d(2)	
	(3) Other reserves	9d(3)	
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)	9e	

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a	
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN	B Three-digit plan number (PN) ▶	509
C Plan sponsor's name as shown on line 2a of Form 5500 EXELON CORPORATION	D Employer Identification Number (EIN) 23-2990190	

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... Yes No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

SOLUS ALTERNATIVE ASSET MANAGEMENT **25 MAPLE STREET**
SUMMIT, NJ 07901

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

SEGALL, BRYANT & HAMILL, LLC

35-2679129

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	INVESTMENT MANAGEMENT	91803	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

EXELON BUSINESS SERVICES CO.

23-3063219

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14	ADMINISTRATOR	26031	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

MITCHELL & TITUS, LLP

13-2781641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	18300	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

BLACKROCK INSTITUTIONAL TRUST CO

94-3112180

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 24 28 50 51	INVESTMENT MANAGEMENT	14729	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

THE NORTHERN TRUST COMPANY

36-1561860

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 21 51 62 68	TRUSTEE/CUSTO DIAN	12058	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

PLANTE MORAN

10 S RIVERSIDE PLAZA
CHICAGO, IL 60606

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 70	CONSULTING	5277	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN</u>	B Three-digit plan number (PN)	<u>509</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>EXELON CORPORATION</u>	D Employer Identification Number (EIN) <u>23-2990190</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>CF BLACKROCK ACWI EQUITY INDEX FUND</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>94-3112180-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>18763924</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MACKAY SHIELDS HIGH YIELD ACTIVE CO</u>		
b Name of sponsor of entity listed in (a): <u>MACKAY SHIELDS LLC</u>		
c EIN-PN <u>13-4080466-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5024684</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN	B Three-digit plan number (PN) ▶ 509
C Plan sponsor's name as shown on line 2a of Form 5500 EXELON CORPORATION	D Employer Identification Number (EIN) 23-2990190

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	227857
		301172
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	627904
(2) U.S. Government securities	1c(2)	23810658
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	417727
(B) All other	1c(3)(B)	14559598
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	23788608
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	2941692

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	63779950	66447359
Liabilities			
g Benefit claims payable.....	1g	2099896	653883
h Operating payables.....	1h	161741	140226
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	2261637	794109
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	61518313	65653250

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	11410845	
(B) Participants.....	2a(1)(B)	12380209	
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		23791054
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-317	
(B) U.S. Government securities.....	2b(1)(B)	980068	
(C) Corporate debt instruments.....	2b(1)(C)	626849	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	36496	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		1643096
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	25693	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		25693
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	16146754	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	16098392	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-609865	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	2985207
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	
c Other income	2c	
d Total income. Add all income amounts in column (b) and enter total.....	2d	27883547

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	
(2) To insurance carriers for the provision of benefits	2e(2)	23577559
(3) Other.....	2e(3)	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	23577559
f Corrective distributions (see instructions)	2f	
g Certain deemed distributions of participant loans (see instructions).....	2g	
h Interest expense.....	2h	
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	26031
(2) Contract administrator fees	2i(2)	
(3) Recordkeeping fees	2i(3)	
(4) IQPA audit fees	2i(4)	18300
(5) Investment advisory and investment management fees	2i(5)	106532
(6) Bank or trust company trustee/custodial fees	2i(6)	12059
(7) Actuarial fees	2i(7)	
(8) Legal fees	2i(8)	
(9) Valuation/appraisal fees	2i(9)	755
(10) Other trustee fees and expenses	2i(10)	5277
(11) Other expenses.....	2i(11)	2097
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	171051
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j	23748610

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k	4134937
l Transfers of assets:		
(1) To this plan.....	2l(1)	
(2) From this plan	2l(2)	

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: MITCHELL & TITUS, LLP

(2) EIN: 13-2781641

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		50000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	X		25749213
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.



INDEPENDENT AUDITOR'S REPORT

To the Participants and the Plan Administrator of the
Exelon Corporation Employees' Life Insurance Plan

Opinion

We have audited the financial statements of the Exelon Corporation Employees' Life Insurance Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits and of benefit obligations as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits and of changes in benefit obligations for the year ended December 31, 2024, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits and of benefit obligations of the Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits and changes in its plan benefit obligations for the year ended December 31, 2024, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are issued.

Management is also responsible for maintaining a current plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records

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with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor’s Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor’s report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users made on the basis of these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan’s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan’s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audits, significant audit findings, and certain internal control-related matters that we identified during the audits.

Other Matter – Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2024, schedule of assets (acquired and disposed of within year) for the year ended December 31, 2024, and schedule of reportable transactions for the year ended December 31, 2024, are presented for the purpose of additional analysis and



are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules are fairly stated, in material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Mitchell Titus, LLP

October 10, 2025

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
As of December 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(d) Cost	(e) Current Value
	INTEREST BEARING CASH			
*	MFB NORTHERN INSTL FDS GOVT PORTFOLIO CL A		627,904	627,904
	Total Interest Bearing Cash		627,904	627,904
	U.S. GOVERNMENT SECURITIES			
	FED HOME LN MTG FLTGT RT 3.5% DUE 07-25-2032	^	300,494	282,908
	FEDERAL HOME LN MTG CORP 3.5% 03-01-2052	^	414,603	350,273
	FEDERAL HOME LN MTG CORP FHLMC #G6-0017 4.5% 03-01-2044	^	33,652	25,071
	FEDERAL HOME LN MTG CORP MULTICLASS SER K063 CL A2 FLTGT 01-25-2027	^	337,310	317,939
	FEDERAL HOME LN MTG CORP POOL #A61373 5%04-01-2036 BEO	^	4,752	4,923
	FEDERAL HOME LN MTG CORP POOL #A93101 5%07-01-2040 BEO	^	4,205	3,716
	FEDERAL HOME LN MTG CORP POOL #C03027 6%09-01-2037 BEO	^	3,968	4,079
	FEDERAL HOME LN MTG CORP POOL #G15787 3%05-01-2031 BEO	^	56,168	49,720
	FEDERAL HOME LN MTG CORP POOL #G18578 3%12-01-2030 BEO	^	36,876	30,995
	FEDERAL HOME LN MTG CORP POOL #SB8191 4.5% 10-01-2037 BEO	^	403,263	395,725
	FEDERAL HOME LN MTG CORP POOL #SB8217 5%03-01-2038 BEO	^	262,113	261,223
	FEDERAL HOME LN MTG CORP POOL #SD8092 3%DUE 09-01-2050 BEO	^	83,001	63,748
	FEDERAL HOME LN MTG CORP POOL #SD8129 2.5% DUE 01-01-2051 REG	^	208,464	179,470
	FEDERAL HOME LN MTG CORP POOL #SD-8173 2.5% 09-01-2051	^	96,378	76,378
	FEDERAL HOME LN MTG CORP POOL #SD-8196 3.5% DUE 01-01-2052 REG	^	622,274	542,144
	FEDERAL HOME LN MTG CORP POOL #SD8231 4.5% 07-01-2052 BEO	^	538,564	502,354
	FEDERAL HOME LN MTG CORP POOL #SD8267 5%DUE 11-01-2052 BEO	^	249,867	248,202
	FEDERAL HOME LN MTG CORP POOL #SD8268 5.5% 11-01-2052 BEO	^	152,739	150,851
	FEDERAL HOME LN MTG CORP POOL #SD8277 5.5% 11-01-2052	^	515,141	516,063
	FEDERAL HOME LOAN MORTGAGE CORP 2.5% 06-01-2037	^	301,245	299,317
	FEDERAL HOME LOAN MORTGAGE CORP 3% 03-01-2052	^	143,313	149,066
	FEDERAL HOME LOAN MORTGAGE CORP 4% 05-01-2052	^	320,053	291,989
	FEDERAL HOME LOAN MORTGAGE CORP 5% 09-01-2052	^	449,740	433,649
	FEDERAL HOME LOAN MORTGAGE CORP 5.5% 01-01-2055	^	414,779	409,562
	FEDERAL HOME LOAN MORTGAGE CORP 5.5% 09-01-2038	^	307,641	308,672
	FEDERAL HOME LOAN MORTGAGE CORP POOL #SD8195 3.0% DUE 01-01-2052 REG	^	175,704	173,314
	FEDERAL HOME LOAN MORTGAGE CORP SER K-153 CL A2 VAR RT 12-25-2032	^	147,189	139,267
	FEDERAL NATIONAL MORTGAGE ASSOC 4% 06-01-2052	^	103,309	102,056
	FEDERAL NATL MTG ASSN GTD MTG POOL #AJ9235 3% 02-01-2027 BEO	^	2,130	1,605
	FEDERAL NATL MTG ASSN GTD MTG POOL #AL2921 3.5% 08-01-2042 BEO	^	48,445	38,791
	FEDERAL NATL MTG ASSN GTD MTG POOL #AL9418 3.5% 08-01-2031 BEO	^	22,460	18,225
	FHLMC GOLD G67702 4 01-01-2047	^	56,138	46,397
	FHLMC MULTICLASS SER 4097 CL DC 1.5% 06-15-2041	^	8,782	8,677
	FHLMC POOL #G15144 2.5 07-01-2029	^	21,204	19,366
	FHLMC POOL #SD8168 3.0% 08-01-2051	^	367,053	312,689
	FNMA 0.87% DUE 08-05-2030	^	495,728	507,750
	FNMA 2.5% MBS 01/06/2050 USDCAS960F POOL #CAS960 2.5% DUE 06-01-2050 BEO	^	202,449	161,182
	FNMA FNMA # MA4841 5% 12-01-2052	^	124,332	125,501
	FNMA NT 5.625 07-15-2037	^	193,299	187,437
	FNMA POOL #670385 6.5% 09-01-2032 BEO	^	4,023	3,991
	FNMA POOL #745151 6.5% 10-01-2035 BEO	^	2,416	2,365
	FNMA POOL #881959 ADJ RT DUE 02-01-2036 BEO	^	6,492	6,516
	FNMA POOL #890790 3% DUE 08-01-2032 BEO	^	41,600	35,982
	FNMA POOL #995879 6% 04-01-2039 BEO	^	5,777	4,471
	FNMA POOL #AD9483 5% 07-01-2040 BEO	^	5,499	4,855
	FNMA POOL #AV0691 4% 12-01-2043 BEO	^	49,585	41,444
	FNMA POOL #BM3238 3.5% DUE 08-01-2047 BEO	^	169,989	166,507
	FNMA POOL #BT0417 2.5% DUE 06-01-2051 BEO	^	76,346	84,991
	FNMA POOL #FM7599 3.5% 01-01-2051 BEO	^	308,773	298,404
	FNMA POOL #MA4048 3% 06-01-2050 BEO	^	256,961	213,546
	FNMA POOL #MA4097 3% 08-01-2050 BEO	^	270,537	221,585
	FNMA POOL #MA4121 3% 09-01-2050 BEO	^	132,296	105,771
	FNMA POOL #MA4438 2.5% 10-01-2051 BEO	^	611,862	553,884
	FNMA POOL #MA4644 4% 05-01-2052 BEO	^	449,943	422,710
	FNMA POOL #MA4686 5% 06-01-2052 BEO	^	294,904	274,463
	FNMA POOL #MA4761 5% 09-01-2052 BEO	^	90,056	87,429
	FNMA POOL #MA4776 4% 10-01-2037 BEO	^	258,900	250,133
	FNMA POOL #MA4797 4% 11-01-2037 BEO	^	280,505	274,401
	FNMA POOL #MA4842 5.5% 12-01-2052 BEO	^	202,197	200,020
	FNMA POOL #MA4894 6% 01-01-2053 BEO	^	204,197	206,771
	FNMA POOL #MA4944 4.5% 03-01-2038 BEO	^	56,385	55,797
	FNMA POOL #MA4991 5.5% 04-01-2038 BEO	^	208,251	208,651
	FNMA POOL #MA5008 4.5% 05-01-2053 BEO	^	340,639	329,323
	FNMA POOL #MA5093 5% 07-01-2038 BEO	^	273,016	272,135
	FNMA POOL #MA5216 6% 12-01-2053 BEO	^	283,133	284,072
	FNMA POOL #MA5295 6% 03-01-2054 BEO	^	336,327	337,718
	FNMA POOL #MA5554 6% 12-01-2054 BEO	^	206,247	204,734
	FNMA POOL #MA5587 6% 01-01-2055 BEO	^	141,537	140,753
	FNMA TRANCHE 862 0.375% 08-25-2025	^	158,464	165,743
	FREDDIE MAC POOL #G08847 4% 11-01-2048 BEO	^	181,407	174,676
	GNMA POOL #3624 5.5% 10-20-2034 BEO	^	6,032	6,802
	GNMA POOL #5018 5% 04-20-2041 BEO	^	2,809	2,226
	GNMA POOL #5114 4% 07-20-2041 BEO	^	8,500	7,732
	GNMA POOL #726323 SER 2039 5% DUE 09-15-2039 REG	^	2,263	2,026
	GNMA POOL #MA7769 3.5% 12-20-2051 BEO	^	248,504	209,977
	GNMA POOL #MA8097 2.5% 06-20-2052 BEO	^	144,335	142,504
	GNMA POOL #MA9853 6.5% 08-20-2054	^	337,677	337,311
	GNMA POOL #MA9908 6.5% 09-20-2054 BEO	^	330,355	328,256
	GNMA POOL #MA9967 6.5% 10-20-2054	^	319,610	317,899
	GNMA SER 21-23 CL MD 1.0% DUE 02-20-2051	^	103,896	86,237
	GNMAII POOL #MA7590 SER 2051 3% DUE 09-20-2051 REG	^	185,385	150,066
	GNMAII POOL #MA8046 4.5% 05-20-2052	^	202,716	199,347
	GNMAII POOL #MA9728 SER 2054 7.0% 06-20-2054	^	171,694	171,993
	GOVERNMENT NATIONAL MORTGAGE ASSOC 6.5% 11-20-2054	^	132,277	132,087
	UNITED STATES OF AMER TREAS BONDS DTD 02/15/2015 2.5% DUE 02-15-2045 REG	^	997,205	778,006
	UNITED STATES OF AMER TREAS BONDS DTD 05/15/2016 2.5% DUE 05-15-2046 REG	^	1,011,700	763,613
	UNITED STATES OF AMER TREAS NOTES 4.5% DUE 11-15-2033	^	885,553	846,281

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
As of December 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(d) Cost	(e) Current Value
	UNITED STATES OF AMER TREAS NOTES 3.5% DUE 01-31-2028	^	400,562	400,551
	UNITED STATES OF AMER TREAS NOTES 4.375% 05-15-2034	^	617,578	602,724
	UNITED STATES OF AMER TREAS NOTES 4.875%04-30-2026	^	370,878	372,862
	UNITED STATES OF AMER TREAS NOTES DTD 11/15/2022 4.125%11-15-2032	^	1,027,664	975,352
	UNITED STATES TREAS BDS 1.25% DUE 05-15-2050	^	704,245	475,000
	UNITED STATES TREAS BDS 3% DUE 05-15-2047 REG	^	731,326	621,567
	UNITED STATES TREAS BDS DTD 08/15/2020 1.375% 08-15-2050	^	683,300	459,241
	UNITED STATES TREAS BDS DTD 11/15/2012 2.75% DUE 11-15-2042 REG	^	1,108,088	785,613
	UNITED STATES TREAS BDS TREASURY BOND 2.375% DUE 11-15-2049 REG	^	672,400	451,904
	UNITED STATES TREAS NTS FIXED 3.125% DUE08-15-2025	^	805,068	809,346
	Total U.S. Government Securities		26,348,709	23,810,658
	<u>CORPORATE DEBT INSTRUMENTS - PREFERRED</u>			
	DTE ELEC CO 3.7% DUE 03-15-2045	^	79,491	57,635
	DUKE ENERGY 3.75% DUE 06-01-2045	^	180,953	145,458
	GRAINGER W W INC 3.75% DUE 05-15-2046	^	99,464	97,351
	TRANSATLANTIC 8% DUE 11-30-2039	^	116,194	117,283
	Total Corporate Debt Instruments - Preferred		476,102	417,727
	<u>CORPORATE DEBT INSTRUMENTS - OTHER</u>			
	ABBVIE INC 4.95% 03-15-2031	^	151,271	150,002
	ADOBE INC 2.3% DUE 02-01-2030	^	102,114	99,610
	AEP TRANSM CO LLC 3.1% DUE 12-01-2026	^	221,986	203,928
	AGILENT TECHNOLOGIES INC 4.75% 09-09-2034	^	207,852	197,752
	AIR PRODS & CHEMS INC 4.85% 02-08-2034	^	97,910	97,702
	ALLSTATE CORP .75% DUE 12-15-2025	^	140,585	139,791
	AMAZON COM INC FIXED 3.875% DUE 08-22-2037	^	98,584	75,096
	AMER AIRLINES FIXED 3.15% 08-15-2033	^	96,254	95,703
	AMERICAN WATER CAPITAL CORP 5.15% 03-01-2034	^	208,517	198,543
	AMERN EXPRESS CR 3.3% DUE 05-03-2027	^	102,434	94,009
	AMPHENOL CORP NEW 2.05% DUE 03-01-2025	^	373,253	375,183
	ANALOG DEVICES INC 3.5% DUE 12-05-2026	^	180,097	161,958
	ANHEUSER-BUSCH 6.625% DUE 08-15-2033	^	288,681	260,915
	AT&T INC FIXED 5.15% DUE 11-15-2046	^	105,075	101,052
	AUTOMATIC DATA PROCESSING INC SR NT 1.7%05-15-2028	^	98,900	100,459
	AVERY DENNISON CORP 2.25% 02-15-2032	^	178,219	172,368
	BA CREDIT CARD TRUST SR 23-A1 CL A1 4.99% 05-15-2028	^	198,078	200,875
	BROWN FORMAN CORP 4.75% 04-15-2033	^	74,644	73,188
	BURL NORTHN SANTA 7.29% DUE 06-01-2036	^	215,255	181,817
	CATERPILLAR INS 6.625% DUE 07-15-2028	^	164,502	137,076
	CBOE GLOBAL MKTS 3.65% DUE 01-12-2027	^	192,176	186,504
	CDN NATL RY CO STEP CPN 6.712% DUE 07-15-2036	^	171,306	144,678
	CHURCH & DWIGHT CO INC 5.6% DUE 11-15-2032	^	60,634	58,756
	CINTAS CORP NO 2 FIXED 4% DUE 05-01-2032	^	209,844	201,245
	CNH EQUIP TR 2006-B SR 2021-C CL A-3 .81% 11-15-2026	^	27,844	27,454
	COLGATE-PALMOLIVE CO 3.25% DUE 08-15-2032 REG	^	195,229	179,792
	COMCAST CORP NEW 6.5% DUE 11-15-2035	^	208,988	195,483
	CONSUMERS 2023 SECURITIZATION FDG 5.21% 09-01-2031	^	268,974	267,647
	CUMMINS INC 1.5% DUE 09-01-2030	^	183,780	163,193
	DAIMLER TRUCKS RETAIL TR 2023-1 SER 23-1 CL A3 5.9% 03-15-2027	^	264,996	267,679
	DARDEN RESTAURANTS INC 4.35% 10-15-2027	^	203,312	202,249
	DICKS SPORTING GOODS INC 4.1% 01-15-2052	^	101,002	100,328
	DISNEY WALT CO 7.125% DUE 04-08-2028	^	182,290	149,478
	DOMINION RES INC 7% DUE 06-15-2038	^	226,927	189,353
	EASTMAN CHEM CO 3.8% DUE 03-15-2025	^	195,248	199,529
	EATON CORP OHIO 4.15 DUE 11-02-2042 REG	^	222,806	173,056
	ECOLAB INC 4.8% DUE 03-24-2030	^	343,693	342,381
	EMERSON ELEC CO .875% DUE 10-15-2026	^	62,027	61,096
	EVERGY INC 2.9% DUE 09-15-2029	^	183,219	163,752
	EXXON MOBIL CORP 2.61% DUE 10-15-2030	^	203,779	200,490
	FEDEX PASS THRU TR FIXED 1.875% DUE 08-20-2035	^	364,835	316,797
	FISERV INC 5.15% 08-12-2034	^	284,470	278,554
	FL PWR & LT CO 3.125% DUE 12-01-2025	^	401,481	370,112
	GENERAL MTRS FINL CO INC 2.7% DUE 08-20-2027 REG	^	271,224	264,543
	GEORGIA PAC CORP 7.375% DUE 12-01-2025	^	329,069	282,004
	HCA INC 4.125% 06-15-2029	^	196,582	198,411
	HERSHEY CO 1.7% DUE 06-01-2030	^	226,320	200,038
	JACOBS ENGR GROUP INC 6.35% 08-18-2028	^	135,538	140,546
	JPMORGAN CHASE & FLTG RT 2.182% DUE 06-01-2028	^	123,867	123,054
	KENVUE INC 5.05% 03-22-2053	^	98,936	103,043
	KEURIG DR PEPPER INC 5.431% 03-15-2034	^	265,579	264,955
	KIMBERLY-CLARK 2.65% DUE 03-01-2025	^	58,297	59,781
	KIMBERLY-CLARK 6.625% DUE 08-01-2037	^	66,249	62,211
	KLA CORP 4.95% 07-15-2052	^	74,975	77,370
	KROGER CO 2.65% DUE 10-15-2026	^	107,141	101,237
	MARTIN MARIETTA MATLS INC 3.2% DUE 07-15-2051	^	132,925	97,180
	MCDONALDS CORP 3.7% DUE 01-30-2026	^	60,381	60,533
	MOLSON COORS 4.2% DUE 07-15-2046	^	89,474	95,910
	MONDELEZ INTL INC 1.5% DUE 05-04-2025	^	230,971	242,212
	NATIONAL RURAL UTILS COOP 3.05% DUE 04-25-2027	^	221,181	202,376
	NETFLIX INC 5.4% 08-15-2054	^	81,593	79,203
	NVENT FINANCE S A R L 4.55% DUE 04-15-2028	^	133,430	138,617
	OGLETHORPE PWR CORP 4.55 DUE 06-01-2044 REG	^	167,293	139,851
	ONEOK INC NEW 5.0% 03-01-2026	^	215,165	200,322
	PACCAR FINL CORP 4.6% DUE 01-31-2029	^	259,338	259,296
	PACIFIC GAS & ELEC CO 6.75% 01-15-2053	^	106,938	109,140
	PEPSICO INC FIXED 2.75% 03-19-2030	^	182,810	181,711
	PINNACLE WEST CAP CORP 1.3% DUE 06-15-2025/06-17-2020 REG	^	326,758	324,458
	PUBLIC SERVICE ELECTRIC & GAS CO 5.2% 08-01-2033	^	262,619	257,171
	QUANTA SVCS INC SR NT 3.05% 10-01-2041	^	108,708	84,421
	REPUBLIC SVCS INC 1.75% DUE 02-15-2032	^	214,812	180,769
	REPUBLIC SVCS INC FIXED 3.375% 11-15-2027	^	91,172	82,177

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
As of December 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(d) Cost	(e) Current Value
	TEXAS INSTRS INC 1.75% DUE 05-04-2030	^	110,463	102,741
	T-MOBILE USA INC 3.875% 04-15-2030	^	81,399	72,446
	TN GAS PIPELN CO 7% DUE 10-15-2028	^	194,000	170,193
	TRCNTNTL GAS PIPE 7.85% DUE 02-01-2026	^	259,414	218,331
	UN PAC RR CO 3.227% DUE 05-14-2026	^	301,661	290,037
	UTD PARCEL SVC INC FIXED 5.2% DUE 04-01-2040	^	80,727	77,993
	VENTAS RLTY LTD PARTNERSHIP 5.625% 07-01-2034	^	150,663	145,937
	VERIZON MASTER TR 4.17% 08-20-2030	^	284,926	282,229
	WASTE CONNECTIONS FIXED 4.25% DUE 12-01-2028	^	314,738	283,883
	WASTE MGMT INC DEL .75% DUE 11-15-2025	^	344,958	338,671
	WELLS FARGO & CO 3% DUE 04-22-2026	^	119,997	127,129
	WI ELEC PWR CO 4.75% DUE 09-30-2032	^	182,411	182,428
	WI ENERGY CORP 6.2% DUE 04-01-2033	^	113,662	98,407
	Total Corporate Debt Instruments - Other		15,441,435	14,559,598
	COMMON / COLLECTIVE TRUST FUNDS			
	CF BLACKROCK ACWI EQUITY INDEX FUND B		14,393,618	18,763,924
	MACKAY SHIELDS HIGH YIELD ACTIVE CORE FUND		4,164,320	5,024,684
	Total Common / Collective Trust Funds		18,557,938	23,788,608
	OTHER INVESTMENTS INCLUDING PRIVATE CREDIT			
	COLUMBIA S C WTRWKS & SWR SYS REV 2.318%02-01-2027 BEO TAXABLE	^	45,000	43,119
	MARIN CALIF CMNTY COLLEGE DIST 3.89% 08-01-2033	^	100,000	92,995
	METRO WASTEWTR RECLAMATION DIST COLO SWRREV 2.713% 04-01-2031 BEO TAXABLE	^	100,000	89,462
	NEW YORK N Y CITY TRANSITIONAL FIN AUTH REV 5.508% 08-01-2037 BEO TAXABLE	^	9,532	9,859
	NEW YORK ST URBAN DEV CORP REV 3.27% 03-15-2028 BEO TAXABLE	^	154,014	149,432
	PRINCE GEORGES CNTY MD 1.186% 09-15-2026BEO TAXABLE	^	35,000	33,239
	SMS LTD		2,178,828	1,960,605
	TEXAS ST 3.952% 10-01-2037 BEO TAXABLE	^	62,117	53,828
	UNIVERSITY CALIF REVS 3.063% 07-01-2025 BEO TAXABLE	^	311,598	313,117
	UNIVERSITY MICH UNIV REVS 1.372% 04-01-2027 BEO TAXABLE	^	40,000	37,509
	VIRGINIA ST RES AUTH INFRASTRUCTURE REV 2.53% 11-01-2028 BEO TAXABLE	^	170,000	158,527
	Total Other Investments		3,206,089	2,941,692
	TOTAL INVESTMENTS		64,658,177	66,146,187

* A party-in-interest to the Plan.
^ See (b)

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
For the Year Ended December 31, 2024

(a) Identity of Issue, Borrower, Lessor, or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(c) Costs of Acquisitions	(d) Proceeds of Dispositions
ADOBE INC 2.3% DUE 02-01-2030	^	(75,223)	69,380
AIR PRODS & CHEMS INC 4.85% 02-08-2034	^	(257,779)	159,360
AMERICAN WTR CAP CORP 3.45% 06-01-2029	^	(9,388)	164,302
AMERN EXPRESS CR 3.3% DUE 05-03-2027	^	(4,787)	7,846
APPLIED MATLS INC FIXED 1.75% DUE 06-01-2030	^	(8,703)	206,195
AT&T INC FIXED 5.15% DUE 11-15-2046	^	(9,480)	23,647
AUTOMATIC DATA PROCESSING INC SR NT 1.7%05-15-2028	^	(59,570)	53,416
AVERY DENNISON CORP .85% DUE 08-15-2024 BEO	^	(24,513)	125,000
CBOE GLOBAL MKTS 3.65% DUE 01-12-2027	^	(14,604)	14,507
CDN NATL RY CO STEP CPN 6.712% DUE 07-15-2036	^	(40,897)	5,579
COMCAST CORP NEW 6.5% DUE 11-15-2035	^	(45,411)	11,287
CONOCO INC 6.95% DUE 04-15-2029	^	(11,049)	148,443
CONTL AIRLS INC 4% DUE 04-29-2026	^	(29,396)	191,145
DICKS SPORTING GOODS INC 3.15% 01-15-2032	^	(4,248)	124,054
DOMINION RES INC 7% DUE 06-15-2038	^	(40,136)	16,712
GENUINE PARTS CO 6.5% DUE 11-01-2028	^	(10,573)	199,929
HERSHEY CO 1.7% DUE 06-01-2030	^	(8,446)	13,183
KENVUE INC 5.05% 03-22-2053	^	(34,252)	28,990
KROGER CO 2.65% DUE 10-15-2026	^	(9,443)	14,092
LOWE'S COMPANIES INC 5.625% DUE 04-15-2053 BEO	^	(10,106)	140,197
MCDONALDS CORP 3.7% DUE 01-30-2026	^	(4,901)	67,943
NATIONAL RURAL UTILS COOP 3.05% DUE 04-25-2027	^	(4,828)	89,791
ORACLE CORP 6.15% DUE 11-09-2029	^	(5,287)	117,055
TEXAS INSTRS INC 1.75% DUE 05-04-2030	^	(38,981)	200,327
T-MOBILE USA INC 3.875% 04-15-2030	^	(4,697)	7,615
UTD PARCEL SVC INC FIXED 5.2% DUE 04-01-2040	^	(4,963)	34,686
WELLS FARGO & CO 3% DUE 04-22-2026	^	(29,331)	47,778

^ Refer to column (b)

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4j - Schedule of Reportable Transactions
For the Year Ended December 31, 2024

Series of Transactions in Excess of Five Percent of Current Value of Plan Assets

(a) Identity of Party Involved	(b) Description of asset (include interest rate and maturity in case of a loan)	Number of Transactions	(c) Purchase Price	(d) Selling Price	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
*	MFB NORTHERN INSTL FDS GOVT PORTFOLIO CL A	106	10,386,892	-	-	10,386,892	10,386,892	-
*	MFB NORTHERN INSTL FDS GOVT PORTFOLIO CL A	147	-	10,508,642	-	10,508,642	10,508,642	-
*	<i>A party-in-interest to the Plan.</i>							

**EXELON CORPORATION
EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN #509)**

FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES

AS OF DECEMBER 31, 2024 AND 2023

WITH INDEPENDENT AUDITOR'S REPORT

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

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Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) As of December 31, 2024	
Schedule H, Line 4(i) - Schedule of Assets (Acquired and Disposed of Within Year) For the Year Ended December 31, 2024	
Schedule H, Line 4(j) - Schedule of Reportable Transactions For the Year Ended December 31, 2024	



INDEPENDENT AUDITOR'S REPORT

To the Participants and the Plan Administrator of the
Exelon Corporation Employees' Life Insurance Plan

Opinion

We have audited the financial statements of the Exelon Corporation Employees' Life Insurance Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits and of benefit obligations as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits and of changes in benefit obligations for the year ended December 31, 2024, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits and of benefit obligations of the Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits and changes in its plan benefit obligations for the year ended December 31, 2024, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are issued.

Management is also responsible for maintaining a current plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records

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with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor’s Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor’s report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users made on the basis of these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan’s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan’s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audits, significant audit findings, and certain internal control-related matters that we identified during the audits.

Other Matter – Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2024, schedule of assets (acquired and disposed of within year) for the year ended December 31, 2024, and schedule of reportable transactions for the year ended December 31, 2024, are presented for the purpose of additional analysis and



are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules are fairly stated, in material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Mitchell Titus, LLP

October 10, 2025

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2024	2023
ASSETS		
Investments, at fair value		
Interest-bearing cash	\$ 627,904	\$ 749,654
U.S. government securities	23,810,658	21,682,689
Corporate debt instruments - preferred	417,727	1,685,970
Corporate debt instruments - other	14,559,598	13,057,640
Common/collective trust funds	23,788,608	22,795,142
Private credit	1,960,605	2,050,631
Other investments	981,087	1,530,367
Total investments	<u>66,146,187</u>	<u>63,552,093</u>
Receivables		
Accrued dividends and interest	300,939	227,607
Due from brokers for securities sold	233	—
Other receivables	—	250
Total receivables	<u>301,172</u>	<u>227,857</u>
Total assets	<u>66,447,359</u>	<u>63,779,950</u>
LIABILITIES		
Accrued administrative expenses	49,465	74,388
Payable to other benefit plans	90,761	87,353
Total liabilities	<u>140,226</u>	<u>161,741</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 66,307,133</u>	<u>\$ 63,618,209</u>

The accompanying Notes are an integral part of these Financial Statements.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Year Ended
	December 31, 2024
ADDITIONS	
Contributions	
Employer	\$ 11,410,845
Participant	12,380,209
Total contributions	23,791,054
Net investment income and appreciation	
Interest income and dividends	1,668,790
Net appreciation in the fair value of investments	2,423,703
Total net investment income and appreciation	4,092,493
Total additions	27,883,547
DEDUCTIONS	
Insurance premiums paid for death benefits	25,023,572
Administrative expenses	171,051
Total deductions	25,194,623
Net increase	2,688,924
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	63,618,209
End of year	\$ 66,307,133

The accompanying Notes are an integral part of these Financial Statements.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

STATEMENTS OF BENEFIT OBLIGATIONS

	December 31,	
	2024	2023
Amounts currently payable		
Premiums due to insurance company	\$ 653,883	\$ 2,099,896
Total amounts currently payable	653,883	2,099,896
Postemployment benefit obligations		
Inactive employees currently disabled	2,545,190	3,053,124
Total postemployment benefit obligations	2,545,190	3,053,124
Postretirement benefit obligations		
Current retirees	142,848,082	150,021,218
Other participants fully eligible for benefits	7,308,227	7,894,239
Other participants not yet fully eligible for benefits	7,120,326	8,189,857
Total postretirement benefit obligations	157,276,635	166,105,314
Total benefit obligations	<u>\$ 160,475,708</u>	<u>\$ 171,258,334</u>

The accompanying Notes are an integral part of these Financial Statements.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

STATEMENT OF CHANGES IN BENEFIT OBLIGATIONS

	Year Ended
	December 31, 2024
Amounts currently payable	
Balance at beginning of year	\$ 2,099,896
Insurance premiums incurred	23,577,559
Insurance premiums paid	(25,023,572)
Balance at end of year	653,883
Postemployment benefit obligation	
Balance at beginning of year	3,053,124
Interest cost	89,762
Expected benefit payments	(555,839)
Actuarial gain	(41,857)
Balance at end of year	2,545,190
Postretirement benefit obligations	
Balance at beginning of year	166,105,314
Increase (decrease) during the year attributable to:	
Service cost	942,091
Interest cost	8,336,349
Actuarial gain	(5,553,176)
Benefits paid	(12,553,943)
Balance at end of year	157,276,635
Total benefit obligations at end of year	\$ 160,475,708

The accompanying Notes are an integral part of these Financial Statements.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

1. Plan Description

The following description of the Exelon Corporation Employees' Life Insurance Plan (the "Plan") provides only general information. Participants should refer to the Plan documents for a complete description of the Plan's provisions.

The Plan is an employee welfare benefit plan subject to the provisions set forth in the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). The Plan provides for participation by eligible employees, including inactive employees who are receiving disability benefits under a Company sponsored long-term disability plan ("Disabled Participants") and eligible retirees of Exelon Corporation (the "Exelon" or the "Company") or one of its subsidiaries who is designated as participating in the Plan (each, a "Participating Employer").

Exelon completed the spinoff of its generation business on February 1, 2022, creating Constellation Energy Corporation ("Constellation"), a new and separate publicly-traded company (the "Separation"). As a result of the Separation, employees of Constellation and its affiliates ceased participating in the Plan and entered into a newly created plan, the Constellation Employees' Life Insurance Plan, sponsored by Constellation Energy Generation, LLC, a subsidiary of Constellation.

The Plan provides life insurance to eligible employees and their eligible dependents and to eligible retirees, and accidental death and dismemberment ("AD&D") benefits to eligible employees and their covered dependents. The Plan also provides retiree life insurance to eligible retired employees who terminate employment from a Participating Employer after completing 10 or more years of service after attaining age 45. Effective January 1, 2025, Metropolitan Life Insurance Company became the administrator for life insurance benefits.

Active employees may choose among several life insurance, dependent life, and AD&D options, some of which require employees to share in the cost of the options through contributions.

Eligible retirees terminating employment prior to January 1, 2014 automatically receive life insurance coverage equal to basic life insurance coverage (up to one times pay unless limited to \$50,000) in effect at retirement up to a maximum of \$150,000. Benefits are reduced during retirement to an ultimate value (i.e., for legacy Exelon retirees, 30% of value at retirement or \$15,000, whichever is greater and for legacy Constellation Energy Group, Inc. and legacy Constellation Energy Nuclear Group, LLC ("CENG") retirees, \$15,000). The amount and timing of the reduction vary by retiree group. In 2012, the Plan was amended to provide that all eligible non-represented retirees (other than legacy CENG and craft and clerical retirees assigned to PECO Energy Company ("PECO")) terminating employment on or after January 1, 2014 (January 1, 2016 for legacy CENG employees and January 1, 2017 for craft and clerical employees assigned to PECO) will receive a \$15,000 life insurance benefit. Effective as of January 1, 2018, no non-represented employee (other than an employee designated as a "craft employee" by his or her Participating Employer) who is hired or rehired on or after January 1, 2018 is eligible to receive retiree life insurance under the Plan. Retiree life insurance amounts vary for employees who retired and were covered by a collective bargaining agreement at the time of their retirement. Currently, eligible retirees are not required to share in the cost for this option; however, PECO retirees who retired prior to January 1, 1994 may be required to contribute depending on the amount of their coverage.

Non-represented, non-craft employees retiring on or after January 1, 2022, are no longer eligible for retiree life insurance benefits.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

Exelon is the sponsor of the Plan and, acting through the Exelon Corporation Benefit Plan Administrative Committee, the administrator of the Plan (the "Plan Administrator"). The Plan Administrator has general responsibility for the administration of the Plan and makes the determination of benefits payable under the Plan, except that if a claims administrator is appointed, the claims administrator has discretionary authority to make claim determinations with respect to the claims it administers.

2. Summary of Significant Accounting Policies

General

The Plan follows the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Benefit Payments

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Plan's expenses are paid by the Plan. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits. In addition, certain investment-related expenses are included in the net appreciation or depreciation of fair value of investments presented in the accompanying Statement of Changes in Net Assets Available for Benefits.

Investment Valuation and Investment Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Purchases and sales of securities are recorded on a trade-date basis. Net appreciation (depreciation) includes the Trust's gains and losses on investments bought and sold as well as held during the year.

Use of Estimates

The preparation of financial statements in accordance with GAAP requires the Plan Administrator to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein; disclosure of contingent assets and liabilities; and the actuarial present value of the benefit plan obligations at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

Reclassifications

Certain prior year amounts have been reclassified for comparative purposes. These reclassifications have no effect on the net assets available for benefits.

3. Fair Value of Investments

Recurring Fair Value Measurements

To increase consistency and comparability in fair value measurements, the FASB established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three levels as follows:

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

- Level 1 — quoted prices (unadjusted) in active markets for identical assets or liabilities that the Plan has the ability to liquidate as of the reporting date.
- Level 2 — inputs other than quoted prices included within Level 1 that are directly observable for the asset or liability or indirectly observable through corroboration with observable market data.
- Level 3 — unobservable inputs, such as internally developed pricing models or third-party valuations for the asset or liability due to little or no market activity for the asset or liability.

The valuation methods for each investment category are described below.

Interest-bearing cash. Investments with original maturities of three months or less when purchased, including certain short-term fixed income securities and money market funds, are considered interest-bearing cash. The fair values are based on observable market prices and, therefore, have been categorized in Level 1 in the fair value hierarchy.

U.S. government securities. U.S. government securities are valued daily based on quoted prices in active markets. Investments in U.S. Treasury securities have been categorized as Level 1 because they trade in highly-liquid and transparent markets. Investments in U.S. government affiliates are based on evaluated prices that reflect observable market information, such as actual trade information of similar securities, adjusted for observable differences and are categorized as Level 2.

Preferred and other corporate debt instruments. Corporate debt instruments are based on evaluated prices that reflect observable market information, such as actual trade information of similar securities, adjusted for observable differences and are categorized as Level 2.

Common/collective trust funds. Common/collective trust funds are maintained by investment companies and hold investments in accordance with a stated set of fund objectives. For common/collective trust funds which are not publicly quoted, the funds are valued using the NAV per fund share as a practical expedient, which is primarily derived from the quoted prices in active markets of the underlying securities, and are not classified within the fair value hierarchy. These investments typically can be redeemed monthly or more frequently, with 30 or less days of notice and without further restrictions.

Private credit. Private credit investments primarily consist of funds that invest in private debt strategies. The fair value of these investments is determined using NAV or by the fund manager or administrator and includes unobservable inputs such as cost, operating results, and discounted cash flows and are not classified within the fair value hierarchy. Redemption frequencies are typically monthly, quarterly, semi-annually and annually with redemption notice periods generally ranging between 30 and 90 days.

Other investments. Other investments include state and municipal government fixed income securities. State and municipal government fixed income securities are valued daily using evaluated prices that reflect observable market information, such as actual trade information of similar securities, adjusted for observable differences and are categorized as Level 2.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

The following tables present assets measured and recorded at fair value on the Plan's Statements of Net Assets Available for Benefits on a recurring basis and their level within the fair value hierarchy as of December 31, 2024 and 2023. The Plan has no investments classified as Level 3:

As of December 31, 2024

	Level 1	Level 2	Not Subject to Leveling	Total
Investments:				
Interest-bearing cash	\$ 627,904	\$ —	\$ —	\$ 627,904
U.S. government securities	8,342,060	15,468,598	—	23,810,658
Corporate debt instruments - preferred	—	417,727	—	417,727
Corporate debt instruments - other	—	14,559,598	—	14,559,598
Common/collective trust funds	—	—	23,788,608	23,788,608
Private credit	—	—	1,960,605	1,960,605
Other investments	—	981,087	—	981,087
Total investments	\$ 8,969,964	\$ 31,427,010	\$ 25,749,213	\$ 66,146,187

As of December 31, 2023

	Level 1	Level 2	Not Subject to Leveling	Total
Investments:				
Interest-bearing cash	\$ 749,654	\$ —	\$ —	\$ 749,654
U.S. government securities	5,884,680	15,798,009	—	21,682,689
Corporate debt instruments - preferred	—	1,685,970	—	1,685,970
Corporate debt instruments - other	—	13,057,640	—	13,057,640
Common/collective trust funds	—	—	22,795,142	22,795,142
Private credit	—	—	2,050,631	2,050,631
Other investments	—	1,530,367	—	1,530,367
Total investments	\$ 6,634,334	\$ 32,071,986	\$ 24,845,773	\$ 63,552,093

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

4. Risks and Uncertainties

Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in these risks in the near term could materially affect investment account balances reported in the Statements of Net Assets Available for Benefits and the amounts reported in the Statement of Changes in Net Assets Available for Benefits.

Plan contributions and postretirement benefit obligations are calculated based on certain assumptions pertaining to interest rates and employee demographics, both of which are subject to change. Due to uncertainties inherent in the estimation and assumption process, it is at least reasonably possible that changes in these estimates and assumptions in the near term could be material to amounts reported in the Statements of Benefit Obligations or Statement of Changes in Benefit Obligations.

The Plan invests in certain funds and engages some investment managers that may use derivative financial instruments including futures, forward foreign exchange, and swap contracts to accomplish their investment strategies. Derivative instruments may be used to mitigate exposure to foreign exchange rate and interest rate fluctuations as well as manage the investment mix in the portfolio. The Plan's exposure is limited to the fund(s) utilizing such derivative investments. Risks of entering into derivatives include the risk of an illiquid market, the inability of a counterparty to perform, or unfavorable movement in foreign currency exchange rates, interest rates, or the underlying securities.

Some investment managers may engage in securities lending programs in which the funds lend securities to borrowers, with the objective of generating additional income. The borrowers of the fund securities deliver collateral to secure each loan in the form of cash, securities or letters of credit and are required to maintain the collateral at a level no less than 100% of the market value of the loaned securities. Cash collateral is invested in common / collective trust funds or collateral pools. Lenders of securities also face the risk that invested cash collateral may become impaired or that the interest paid on loans may exceed the amount earned on the invested collateral. The Plan's exposure is limited to the funds that lend securities.

5. Funding Policy

Current life insurance and accidental death claims of active and retired participants and their covered dependents and beneficiaries are provided through a fully insured policy. The Company pays premiums to a third-party insurance provider. A Voluntary Employees' Beneficiary Accidental Death Trust ("VEBA") has been created to pay for current and future life insurance premiums and claims of retirees of PECO who participated in the PECO plan as of October 19, 2000 or who, thereafter, retired from a location that, as of October 19, 2000, was owned by PECO or its affiliates.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

6. Benefit Obligations

The postemployment obligation represents the actuarial present value or the cost of estimated future life insurance benefits for Disabled Participants that are attributed by the terms of the Plan to employee service rendered to the date of the financial statements, reduced by the actuarial present value of contributions expected to be received in the future from current Disabled Participants. The obligation represents the amount that is expected to be funded by contributions from the Company and from existing assets of the Plan.

The postretirement benefit obligations represent the actuarial present value of estimated future periodic payments that are attributable under the Plan's provisions to the service employees have rendered. Postretirement benefits include future benefits expected to be paid to: (a) beneficiaries of retired or terminated employees, and (b) beneficiaries of active employees after retirement from service with a Participating Employer. Prior to an active employee's full eligibility date, the postretirement benefit obligation is that portion of the expected postretirement benefit obligation that is attributed to that employee's service with a Participating Employer rendered to the valuation date.

The postemployment and postretirement benefit obligations are estimated by the Plan's actuary, Willis Towers Watson. The postemployment obligation is the sum of two components: a) the actuarial present value of benefits expected to be paid by the Plan for current Disabled Participants, and b) for service-related benefits, the present value of future benefits deemed to be accrued to date by currently active employees, determined based on the last-in, first out (LIFO) cost method. Postretirement benefit obligations are determined based on the amount that results from applying actuarial assumptions to historical claims-cost data to estimate future annual payments for the time value of money (through discounts of interest), and the probability of payment by means of decrements such as those for death, disability, withdrawal, or retirement, between the actuarial valuation and the expected date of payment. It also reflects the portion of those costs expected to be borne by the retired participants and other providers, and is presented net of the present value of expected future retiree contributions.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

The significant actuarial assumptions which related to the benefits used in the valuation as of December 31, 2024 and 2023, were as follows:

As of December 31, 2024

Discount Rate - Postemployment benefit obligation	4.29%
Discount Rate - Postretirement benefit obligation	5.64%
Retirement	Varying rates (between ages 55 and 70)
Disability Termination	2016 Group Long Term Disability Table (GLTD) with a 6 month elimination period
Postemployment mortality basis	The Pri-2012 Mortality Table projected with the MP-2021 improvement scale with ultimate mortality improvement rate converging to Proxy SSA mortality
Postretirement mortality basis	The Pri-2012 Mortality Table projected with the MP-2021 improvement scale with ultimate mortality improvement rate converging to Proxy SSA mortality

As of December 31, 2023

Discount Rate - Postemployment benefit obligation	2.94%
Discount Rate - Postretirement benefit obligation	5.17%
Retirement	Varying rates (between ages 55 and 70)
Disability Termination	2016 Group Long Term Disability Table (GLTD) with a 6 month elimination period
Postemployment mortality basis	The Pri-2012 Mortality Table projected with the MP-2021 improvement scale with ultimate mortality improvement rate converging to Proxy SSA mortality
Postretirement mortality basis	The Pri-2012 Mortality Table projected with the MP-2021 improvement scale with ultimate mortality improvement rate converging to Proxy SSA mortality

7. Plan Termination

The Plan may be amended, modified or terminated by Exelon at any time, subject to requirements set forth by ERISA. In the event of termination of the Plan, all remaining assets held in the VEBA shall be used to provide benefits contemplated by the Plan.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

8. Income Tax Status

The Internal Revenue Service issued a determination letter dated October 7, 1996 that the VEBA is exempt from federal income taxes under the provisions of Section 501(c)(9) of the Internal Revenue Code ("IRC"). The Plan Administrator believes that the VEBA, as amended, and the Plan are being operated in compliance with the applicable requirements of the IRC and therefore, believes that the Plan is qualified and the VEBA remains tax exempt.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognizes a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the applicable authorities. The Company has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2024, there were no uncertain tax positions taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. Related-Party and Party-in-Interest Transactions

As of December 31, 2024 and 2023, the Plan had claims payable to other benefit plans of \$90,761 and \$87,353, respectively, on the Statements of Net Assets Available for Plan Benefits. These transactions qualify as exempt party-in-interest transactions.

The Plan includes investments in funds held by the Trustee. Fees incurred by the Plan payable to Northern Trust for custodial services amounted to \$12,059 for the year ended December 31, 2024. Administrative fees paid to the Trustee are necessary for the operation of the Plan and represents no more than reasonable compensation.

The Company provides certain administrative services, which includes administration, investment, and accounting services to the Plan. For the year ended December 31, 2024, the Plan paid administrative fees of \$26,031 to the Company.

These payments qualify as exempt party-in-interest transactions, in accordance with ERISA. There have been no known prohibited transactions with a party-in-interest.

10. Reconciliation of Financial Statements to Form 5500

Amounts currently payable to insurance carriers are recorded as benefit payments to insurance carriers in the Plan's Form 5500, but are recorded as an obligation in the Plan's financial statements in accordance with GAAP.

At December 31, 2024 and 2023, the Plan had a postemployment benefit obligation of \$2,545,190 and \$3,053,124, respectively. Also, at December 31, 2024 and 2023, the Plan had a postretirement benefit obligation of \$157,276,635 and \$166,105,314, respectively. The postemployment and postretirement benefit obligation amounts are not recorded as a Plan liability on the Plan's Form 5500.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN

NOTES TO FINANCIAL STATEMENTS

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500:

	December 31,	
	2024	2023
Net assets available for benefits per the financial statements	\$ 66,307,133	\$ 63,618,209
Less: Benefit obligations currently payable (premiums due to insurance companies)	653,883	2,099,896
Net assets available for benefits per Form 5500	<u>\$ 65,653,250</u>	<u>\$ 61,518,313</u>

The following is a reconciliation of the insurance premiums paid per the financial statements to the Form 5500:

	Year Ended
	December 31, 2024
Insurance premiums paid for death benefits per the Financial Statements	\$ 25,023,572
Add: Insurance premiums payable, end of year	653,883
Less: Insurance premiums payable, beginning of year	2,099,896
Benefit Payments per the Form 5500	<u>\$ 23,577,559</u>

11. Subsequent Events

The Plan's management evaluated subsequent events through October 10, 2025, the date the financial statements were available to be issued, and determined that there were no additional subsequent events to be recognized or disclosed in the financial statements.

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
As of December 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(d) Cost	(e) Current Value
	INTEREST BEARING CASH			
*	MFB NORTHERN INSTL FDS GOVT PORTFOLIO CL A		627,904	627,904
	Total Interest Bearing Cash		627,904	627,904
	U.S. GOVERNMENT SECURITIES			
	FED HOME LN MTG FLTGT RT 3.5% DUE 07-25-2032	^	300,494	282,908
	FEDERAL HOME LN MTG CORP 3.5% 03-01-2052	^	414,603	350,273
	FEDERAL HOME LN MTG CORP FHLMC #G6-0017 4.5% 03-01-2044	^	33,652	25,071
	FEDERAL HOME LN MTG CORP MULTICLASS SER K063 CL A2 FLTGT 01-25-2027	^	337,310	317,939
	FEDERAL HOME LN MTG CORP POOL #A61373 5%04-01-2036 BEO	^	4,752	4,923
	FEDERAL HOME LN MTG CORP POOL #A93101 5%07-01-2040 BEO	^	4,205	3,716
	FEDERAL HOME LN MTG CORP POOL #C03027 6%09-01-2037 BEO	^	3,968	4,079
	FEDERAL HOME LN MTG CORP POOL #G15787 3%05-01-2031 BEO	^	56,168	49,720
	FEDERAL HOME LN MTG CORP POOL #G18578 3%12-01-2030 BEO	^	36,876	30,995
	FEDERAL HOME LN MTG CORP POOL #SB8191 4.5% 10-01-2037 BEO	^	403,263	395,725
	FEDERAL HOME LN MTG CORP POOL #SB8217 5%03-01-2038 BEO	^	262,113	261,223
	FEDERAL HOME LN MTG CORP POOL #SD8092 3%DUE 09-01-2050 BEO	^	83,001	63,748
	FEDERAL HOME LN MTG CORP POOL #SD8129 2.5% DUE 01-01-2051 REG	^	208,464	179,470
	FEDERAL HOME LN MTG CORP POOL #SD-8173 2.5% 09-01-2051	^	96,378	76,378
	FEDERAL HOME LN MTG CORP POOL #SD-8196 3.5% DUE 01-01-2052 REG	^	622,274	542,144
	FEDERAL HOME LN MTG CORP POOL #SD8231 4.5% 07-01-2052 BEO	^	538,564	502,354
	FEDERAL HOME LN MTG CORP POOL #SD8267 5%DUE 11-01-2052 BEO	^	249,867	248,202
	FEDERAL HOME LN MTG CORP POOL #SD8268 5.5% 11-01-2052 BEO	^	152,739	150,851
	FEDERAL HOME LN MTG CORP POOL #SD8277 5.5% 11-01-2052	^	515,141	516,063
	FEDERAL HOME LOAN MORTGAGE CORP 2.5% 06-01-2037	^	301,245	299,317
	FEDERAL HOME LOAN MORTGAGE CORP 3% 03-01-2052	^	143,313	149,066
	FEDERAL HOME LOAN MORTGAGE CORP 4% 05-01-2052	^	320,053	291,989
	FEDERAL HOME LOAN MORTGAGE CORP 5% 09-01-2052	^	449,740	433,649
	FEDERAL HOME LOAN MORTGAGE CORP 5.5% 01-01-2055	^	414,779	409,562
	FEDERAL HOME LOAN MORTGAGE CORP 5.5% 09-01-2038	^	307,641	308,672
	FEDERAL HOME LOAN MORTGAGE CORP POOL #SD8195 3.0% DUE 01-01-2052 REG	^	175,704	173,314
	FEDERAL HOME LOAN MORTGAGE CORP SER K-153 CL A2 VAR RT 12-25-2032	^	147,189	139,267
	FEDERAL NATIONAL MORTGAGE ASSOC 4% 06-01-2052	^	103,309	102,056
	FEDERAL NATL MTG ASSN GTD MTG POOL #AJ9235 3% 02-01-2027 BEO	^	2,130	1,605
	FEDERAL NATL MTG ASSN GTD MTG POOL #AL2921 3.5% 08-01-2042 BEO	^	48,445	38,791
	FEDERAL NATL MTG ASSN GTD MTG POOL #AL9418 3.5% 08-01-2031 BEO	^	22,460	18,225
	FHLMC GOLD G67702 4 01-01-2047	^	56,138	46,397
	FHLMC MULTICLASS SER 4097 CL DC 1.5% 06-15-2041	^	8,782	8,677
	FHLMC POOL #G15144 2.5 07-01-2029	^	21,204	19,366
	FHLMC POOL #SD8168 3.0% 08-01-2051	^	367,053	312,689
	FNMA 0.87% DUE 08-05-2030	^	495,728	507,750
	FNMA 2.5% MBS 01/06/2050 USDCAS960F POOL #CAS960 2.5% DUE 06-01-2050 BEO	^	202,449	161,182
	FNMA FNMA # MA4841 5% 12-01-2052	^	124,332	125,501
	FNMA NT 5.625 07-15-2037	^	193,299	187,437
	FNMA POOL #670385 6.5% 09-01-2032 BEO	^	4,023	3,991
	FNMA POOL #745151 6.5% 10-01-2035 BEO	^	2,416	2,365
	FNMA POOL #881959 ADJ RT DUE 02-01-2036 BEO	^	6,492	6,516
	FNMA POOL #890790 3% DUE 08-01-2032 BEO	^	41,600	35,982
	FNMA POOL #995879 6% 04-01-2039 BEO	^	5,777	4,471
	FNMA POOL #AD9483 5% 07-01-2040 BEO	^	5,499	4,855
	FNMA POOL #AV0691 4% 12-01-2043 BEO	^	49,585	41,444
	FNMA POOL #BM3238 3.5% DUE 08-01-2047 BEO	^	169,989	166,507
	FNMA POOL #BT0417 2.5% DUE 06-01-2051 BEO	^	76,346	84,991
	FNMA POOL #FM7599 3.5% 01-01-2051 BEO	^	308,773	298,404
	FNMA POOL #MA4048 3% 06-01-2050 BEO	^	256,961	213,546
	FNMA POOL #MA4097 3% 08-01-2050 BEO	^	270,537	221,585
	FNMA POOL #MA4121 3% 09-01-2050 BEO	^	132,296	105,771
	FNMA POOL #MA4438 2.5% 10-01-2051 BEO	^	611,862	553,884
	FNMA POOL #MA4644 4% 05-01-2052 BEO	^	449,943	422,710
	FNMA POOL #MA4686 5% 06-01-2052 BEO	^	294,904	274,463
	FNMA POOL #MA4761 5% 09-01-2052 BEO	^	90,056	87,429
	FNMA POOL #MA4776 4% 10-01-2037 BEO	^	258,900	250,133
	FNMA POOL #MA4797 4% 11-01-2037 BEO	^	280,505	274,401
	FNMA POOL #MA4842 5.5% 12-01-2052 BEO	^	202,197	200,020
	FNMA POOL #MA4894 6% 01-01-2053 BEO	^	204,197	206,771
	FNMA POOL #MA4944 4.5% 03-01-2038 BEO	^	56,385	55,797
	FNMA POOL #MA4991 5.5% 04-01-2038 BEO	^	208,251	208,651
	FNMA POOL #MA5008 4.5% 05-01-2053 BEO	^	340,639	329,323
	FNMA POOL #MA5093 5% 07-01-2038 BEO	^	273,016	272,135
	FNMA POOL #MA5216 6% 12-01-2053 BEO	^	283,133	284,072
	FNMA POOL #MA5295 6% 03-01-2054 BEO	^	336,327	337,718
	FNMA POOL #MA5554 6% 12-01-2054 BEO	^	206,247	204,734
	FNMA POOL #MA5587 6% 01-01-2055 BEO	^	141,537	140,753
	FNMA TRANCHE 862 0.375% 08-25-2025	^	158,464	165,743
	FREDDIE MAC POOL #G08847 4% 11-01-2048 BEO	^	181,407	174,676
	GNMA POOL #3624 5.5% 10-20-2034 BEO	^	6,032	6,802
	GNMA POOL #5018 5% 04-20-2041 BEO	^	2,809	2,226
	GNMA POOL #5114 4% 07-20-2041 BEO	^	8,500	7,732
	GNMA POOL #726323 SER 2039 5% DUE 09-15-2039 REG	^	2,263	2,026
	GNMA POOL #MA7769 3.5% 12-20-2051 BEO	^	248,504	209,977
	GNMA POOL #MA8097 2.5% 06-20-2052 BEO	^	144,335	142,504
	GNMA POOL #MA9853 6.5% 08-20-2054	^	337,677	337,311
	GNMA POOL #MA9908 6.5% 09-20-2054 BEO	^	330,355	328,256
	GNMA POOL #MA9967 6.5% 10-20-2054	^	319,610	317,899
	GNMA SER 21-23 CL MD 1.0% DUE 02-20-2051	^	103,896	86,237
	GNMAII POOL #MA7590 SER 2051 3% DUE 09-20-2051 REG	^	185,385	150,066
	GNMAII POOL #MA8046 4.5% 05-20-2052	^	202,716	199,347
	GNMAII POOL #MA9728 SER 2054 7.0% 06-20-2054	^	171,694	171,993
	GOVERNMENT NATIONAL MORTGAGE ASSOC 6.5% 11-20-2054	^	132,277	132,087
	UNITED STATES OF AMER TREAS BONDS DTD 02/15/2015 2.5% DUE 02-15-2045 REG	^	997,205	778,006
	UNITED STATES OF AMER TREAS BONDS DTD 05/15/2016 2.5% DUE 05-15-2046 REG	^	1,011,700	763,613
	UNITED STATES OF AMER TREAS NOTES 4.5% DUE 11-15-2033	^	885,553	846,281

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(d) Cost	(e) Current Value
	UNITED STATES OF AMER TREAS NOTES 3.5% DUE 01-31-2028	^	400,562	400,551
	UNITED STATES OF AMER TREAS NOTES 4.375% 05-15-2034	^	617,578	602,724
	UNITED STATES OF AMER TREAS NOTES 4.875%04-30-2026	^	370,878	372,862
	UNITED STATES OF AMER TREAS NOTES DTD 11/15/2022 4.125%11-15-2032	^	1,027,664	975,352
	UNITED STATES TREAS BDS 1.25% DUE 05-15-2050	^	704,245	475,000
	UNITED STATES TREAS BDS 3% DUE 05-15-2047 REG	^	731,326	621,567
	UNITED STATES TREAS BDS DTD 08/15/2020 1.375% 08-15-2050	^	683,300	459,241
	UNITED STATES TREAS BDS DTD 11/15/2012 2.75% DUE 11-15-2042 REG	^	1,108,088	785,613
	UNITED STATES TREAS BDS TREASURY BOND 2.375% DUE 11-15-2049 REG	^	672,400	451,904
	UNITED STATES TREAS NTS FIXED 3.125% DUE08-15-2025	^	805,068	809,346
	Total U.S. Government Securities		26,348,709	23,810,658
	CORPORATE DEBT INSTRUMENTS - PREFERRED			
	DTE ELEC CO 3.7% DUE 03-15-2045	^	79,491	57,635
	DUKE ENERGY 3.75% DUE 06-01-2045	^	180,953	145,458
	GRAINGER W W INC 3.75% DUE 05-15-2046	^	99,464	97,351
	TRANSATLANTIC 8% DUE 11-30-2039	^	116,194	117,283
	Total Corporate Debt Instruments - Preferred		476,102	417,727
	CORPORATE DEBT INSTRUMENTS - OTHER			
	ABBVIE INC 4.95% 03-15-2031	^	151,271	150,002
	ADOBE INC 2.3% DUE 02-01-2030	^	102,114	99,610
	AEP TRANSM CO LLC 3.1% DUE 12-01-2026	^	221,986	203,928
	AGILENT TECHNOLOGIES INC 4.75% 09-09-2034	^	207,852	197,752
	AIR PRODS & CHEMS INC 4.85% 02-08-2034	^	97,910	97,702
	ALLSTATE CORP .75% DUE 12-15-2025	^	140,585	139,791
	AMAZON COM INC FIXED 3.875% DUE 08-22-2037	^	98,584	75,096
	AMER AIRLINES FIXED 3.15% 08-15-2033	^	96,254	95,703
	AMERICAN WATER CAPITAL CORP 5.15% 03-01-2034	^	208,517	198,543
	AMERN EXPRESS CR 3.3% DUE 05-03-2027	^	102,434	94,009
	AMPHENOL CORP NEW 2.05% DUE 03-01-2025	^	373,253	375,183
	ANALOG DEVICES INC 3.5% DUE 12-05-2026	^	180,097	161,958
	ANHEUSER-BUSCH 6.625% DUE 08-15-2033	^	288,681	260,915
	AT&T INC FIXED 5.15% DUE 11-15-2046	^	105,075	101,052
	AUTOMATIC DATA PROCESSING INC SR NT 1.7%05-15-2028	^	98,900	100,459
	AVERY DENNISON CORP 2.25% 02-15-2032	^	178,219	172,368
	BA CREDIT CARD TRUST SR 23-A1 CL A1 4.79% 05-15-2028	^	198,078	200,875
	BROWN FORMAN CORP 4.75% 04-15-2033	^	74,644	73,188
	BURL NORTHN SANTA 7.29% DUE 06-01-2036	^	215,255	181,817
	CATERPILLAR INS 6.625% DUE 07-15-2028	^	164,502	137,076
	CBOE GLOBAL MKTS 3.65% DUE 01-12-2027	^	192,176	186,504
	CDN NATL RY CO STEP CPN 6.712% DUE 07-15-2036	^	171,306	144,678
	CHURCH & DWIGHT CO INC 5.6% DUE 11-15-2032	^	60,634	58,756
	CINTAS CORP NO 2 FIXED 4% DUE 05-01-2032	^	209,844	201,245
	CNH EQUIP TR 2006-B SR 2021-C CL A-3 .81% 11-15-2026	^	27,844	27,454
	COLGATE-PALMOLIVE CO 3.25% DUE 08-15-2032 REG	^	195,229	179,792
	COMCAST CORP NEW 6.5% DUE 11-15-2035	^	208,988	195,483
	CONSUMERS 2023 SECURITIZATION FDG 5.21% 09-01-2031	^	268,974	267,647
	CUMMINS INC 1.5% DUE 09-01-2030	^	183,780	163,193
	DAIMLER TRUCKS RETAIL TR 2023-1 SER 23-1 CL A3 5.9% 03-15-2027	^	264,996	267,679
	DARDEN RESTAURANTS INC 4.35% 10-15-2027	^	203,312	202,249
	DICKS SPORTING GOODS INC 4.1% 01-15-2052	^	101,002	100,328
	DISNEY WALT CO 7.125% DUE 04-08-2028	^	182,290	149,478
	DOMINION RES INC 7% DUE 06-15-2038	^	226,927	189,353
	EASTMAN CHEM CO 3.8% DUE 03-15-2025	^	195,248	199,529
	EATON CORP OHIO 4.15 DUE 11-02-2042 REG	^	222,806	173,056
	ECOLAB INC 4.8% DUE 03-24-2030	^	343,693	342,381
	EMERSON ELEC CO .875% DUE 10-15-2026	^	62,027	61,096
	EVERGY INC 2.9% DUE 09-15-2029	^	183,219	163,752
	EXXON MOBIL CORP 2.61% DUE 10-15-2030	^	203,779	200,490
	FEDEX PASS THRU TR FIXED 1.875% DUE 08-20-2035	^	364,835	316,797
	FISERV INC 5.15% 08-12-2034	^	284,470	278,554
	FL PWR & LT CO 3.125% DUE 12-01-2025	^	401,481	370,112
	GENERAL MTRS FINL CO INC 2.7% DUE 08-20-2027 REG	^	271,224	264,543
	GEORGIA PAC CORP 7.375% DUE 12-01-2025	^	329,069	282,004
	HCA INC 4.125% 06-15-2029	^	196,582	198,411
	HERSHEY CO 1.7% DUE 06-01-2030	^	226,320	200,038
	JACOBS ENGR GROUP INC 6.35% 08-18-2028	^	135,538	140,546
	JPMORGAN CHASE & FLTG RT 2.182% DUE 06-01-2028	^	123,867	123,054
	KENVUE INC 5.05% 03-22-2053	^	98,936	103,043
	KEURIG DR PEPPER INC 5.431% 03-15-2034	^	265,579	264,955
	KIMBERLY-CLARK 2.65% DUE 03-01-2025	^	58,297	59,781
	KIMBERLY-CLARK 6.625% DUE 08-01-2037	^	66,249	62,211
	KLA CORP 4.95% 07-15-2052	^	74,975	77,370
	KROGER CO 2.65% DUE 10-15-2026	^	107,141	101,237
	MARTIN MARIETTA MATLS INC 3.2% DUE 07-15-2051	^	132,925	97,180
	MCDONALDS CORP 3.7% DUE 01-30-2026	^	60,381	60,533
	MOLSON COORS 4.2% DUE 07-15-2046	^	89,474	95,910
	MONDELEZ INTL INC 1.5% DUE 05-04-2025	^	230,971	242,212
	NATIONAL RURAL UTILS COOP 3.05% DUE 04-25-2027	^	221,181	202,376
	NETFLIX INC 5.4% 08-15-2054	^	81,593	79,203
	NVENT FINANCE S A R L 4.55% DUE 04-15-2028	^	133,430	138,617
	OGLETHORPE PWR CORP 4.55 DUE 06-01-2044 REG	^	167,293	139,851
	ONEOK INC NEW 5.0% 03-01-2026	^	215,165	200,322
	PACCAR FINL CORP 4.6% DUE 01-31-2029	^	259,338	259,296
	PACIFIC GAS & ELEC CO 6.75% 01-15-2053	^	106,938	109,140
	PEPSICO INC FIXED 2.75% 03-19-2030	^	182,810	181,711
	PINNACLE WEST CAP CORP 1.3% DUE 06-15-2025/06-17-2020 REG	^	326,758	324,458
	PUBLIC SERVICE ELECTRIC & GAS CO 5.2% 08-01-2033	^	262,619	257,171
	QUANTA SVCS INC SR NT 3.05% 10-01-2041	^	108,708	84,421
	REPUBLIC SVCS INC 1.75% DUE 02-15-2032	^	214,812	180,769
	REPUBLIC SVCS INC FIXED 3.375% 11-15-2027	^	91,172	82,177

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	TEXAS INSTRS INC 1.75% DUE 05-04-2030	^	110,463	102,741
	T-MOBILE USA INC 3.875% 04-15-2030	^	81,399	72,446
	TN GAS PIPELN CO 7% DUE 10-15-2028	^	194,000	170,193
	TRCNTNTL GAS PIPE 7.85% DUE 02-01-2026	^	259,414	218,331
	UN PAC RR CO 3.227% DUE 05-14-2026	^	301,661	290,037
	UTD PARCEL SVC INC FIXED 5.2% DUE 04-01-2040	^	80,727	77,993
	VENTAS RLTY LTD PARTNERSHIP 5.625% 07-01-2034	^	150,663	145,937
	VERIZON MASTER TR 4.17% 08-20-2030	^	284,926	282,229
	WASTE CONNECTIONS FIXED 4.25% DUE 12-01-2028	^	314,738	283,883
	WASTE MGMT INC DEL .75% DUE 11-15-2025	^	344,958	338,671
	WELLS FARGO & CO 3% DUE 04-22-2026	^	119,997	127,129
	WI ELEC PWR CO 4.75% DUE 09-30-2032	^	182,411	182,428
	WI ENERGY CORP 6.2% DUE 04-01-2033	^	113,662	98,407
	Total Corporate Debt Instruments - Other		15,441,435	14,559,598
	COMMON / COLLECTIVE TRUST FUNDS			
	CF BLACKROCK ACWI EQUITY INDEX FUND B		14,393,618	18,763,924
	MACKAY SHIELDS HIGH YIELD ACTIVE CORE FUND		4,164,320	5,024,684
	Total Common / Collective Trust Funds		18,557,938	23,788,608
	OTHER INVESTMENTS INCLUDING PRIVATE CREDIT			
	COLUMBIA S C WTRWKS & SWR SYS REV 2.318%02-01-2027 BEO TAXABLE	^	45,000	43,119
	MARIN CALIF CMNTY COLLEGE DIST 3.89% 08-01-2033	^	100,000	92,995
	METRO WASTEWTR RECLAMATION DIST COLO SWRREV 2.713% 04-01-2031 BEO TAXABLE	^	100,000	89,462
	NEW YORK N Y CITY TRANSITIONAL FIN AUTH REV 5.508% 08-01-2037 BEO TAXABLE	^	9,532	9,859
	NEW YORK ST URBAN DEV CORP REV 3.27% 03-15-2028 BEO TAXABLE	^	154,014	149,432
	PRINCE GEORGES CNTY MD 1.186% 09-15-2026BEO TAXABLE	^	35,000	33,239
	SMS LTD		2,178,828	1,960,605
	TEXAS ST 3.952% 10-01-2037 BEO TAXABLE	^	62,117	53,828
	UNIVERSITY CALIF REVS 3.063% 07-01-2025 BEO TAXABLE	^	311,598	313,117
	UNIVERSITY MICH UNIV REVS 1.372% 04-01-2027 BEO TAXABLE	^	40,000	37,509
	VIRGINIA ST RES AUTH INFRASTRUCTURE REV 2.53% 11-01-2028 BEO TAXABLE	^	170,000	158,527
	Total Other Investments		3,206,089	2,941,692
	TOTAL INVESTMENTS		64,658,177	66,146,187

* A party-in-interest to the Plan.
^ See (b)

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
For the Year Ended December 31, 2024

(a) Identity of Issue, Borrower, Lessor, or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value	(c) Costs of Acquisitions	(d) Proceeds of Dispositions
ADOBE INC 2.3% DUE 02-01-2030	^	(75,223)	69,380
AIR PRODS & CHEMS INC 4.85% 02-08-2034	^	(257,779)	159,360
AMERICAN WTR CAP CORP 3.45% 06-01-2029	^	(9,388)	164,302
AMERN EXPRESS CR 3.3% DUE 05-03-2027	^	(4,787)	7,846
APPLIED MATLS INC FIXED 1.75% DUE 06-01-2030	^	(8,703)	206,195
AT&T INC FIXED 5.15% DUE 11-15-2046	^	(9,480)	23,647
AUTOMATIC DATA PROCESSING INC SR NT 1.7%05-15-2028	^	(59,570)	53,416
AVERY DENNISON CORP .85% DUE 08-15-2024 BEO	^	(24,513)	125,000
CBOE GLOBAL MKTS 3.65% DUE 01-12-2027	^	(14,604)	14,507
CDN NATL RY CO STEP CPN 6.712% DUE 07-15-2036	^	(40,897)	5,579
COMCAST CORP NEW 6.5% DUE 11-15-2035	^	(45,411)	11,287
CONOCO INC 6.95% DUE 04-15-2029	^	(11,049)	148,443
CONTL AIRLS INC 4% DUE 04-29-2026	^	(29,396)	191,145
DICKS SPORTING GOODS INC 3.15% 01-15-2032	^	(4,248)	124,054
DOMINION RES INC 7% DUE 06-15-2038	^	(40,136)	16,712
GENUINE PARTS CO 6.5% DUE 11-01-2028	^	(10,573)	199,929
HERSHEY CO 1.7% DUE 06-01-2030	^	(8,446)	13,183
KENVUE INC 5.05% 03-22-2053	^	(34,252)	28,990
KROGER CO 2.65% DUE 10-15-2026	^	(9,443)	14,092
LOWE'S COMPANIES INC 5.625% DUE 04-15-2053 BEO	^	(10,106)	140,197
MCDONALDS CORP 3.7% DUE 01-30-2026	^	(4,901)	67,943
NATIONAL RURAL UTILS COOP 3.05% DUE 04-25-2027	^	(4,828)	89,791
ORACLE CORP 6.15% DUE 11-09-2029	^	(5,287)	117,055
TEXAS INSTRS INC 1.75% DUE 05-04-2030	^	(38,981)	200,327
T-MOBILE USA INC 3.875% 04-15-2030	^	(4,697)	7,615
UTD PARCEL SVC INC FIXED 5.2% DUE 04-01-2040	^	(4,963)	34,686
WELLS FARGO & CO 3% DUE 04-22-2026	^	(29,331)	47,778

^ Refer to column (b)

EXELON CORPORATION EMPLOYEES' LIFE INSURANCE PLAN
(EIN: 23-2990190, PLAN # 509)
Schedule H, line 4j - Schedule of Reportable Transactions
For the Year Ended December 31, 2024

Series of Transactions in Excess of Five Percent of Current Value of Plan Assets

(a) Identity of Party Involved	(b) Description of asset (include interest rate and maturity in case of a loan)	Number of Transactions	(c) Purchase Price	(d) Selling Price	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
*	MFB NORTHERN INSTL FDS GOVT PORTFOLIO CL A	106	10,386,892	-	-	10,386,892	10,386,892	-
*	MFB NORTHERN INSTL FDS GOVT PORTFOLIO CL A	147	-	10,508,642	-	10,508,642	10,508,642	-
*	<i>A party-in-interest to the Plan.</i>							