## Edgar Filing: FIRSTENERGY CORP - Form 4

FIRSTENER	GY CORP									
Form 4										
May 13, 2009	)									
FORM	<b>4 INTER</b>	о статра	SECUD	TTIES AT		III A NCE	COMMISSION	r	PPROVAL	
		DSIAIES		hington,				OMB Number:	3235-0287	
Check this	s box		vv a5	inington,	D.C. 203	77			January 31,	
if no longer STATEMENT OF CHANGES I				GES IN F	IN BENEFICIAL OWNERSHIP OF			Expires:	2005	
subject to Section 16		SECURITIES						Estimated average burden hours per		
Form 4 or							response	•		
Form 5	Filed p	ursuant to	Section 16	6(a) of the	Securiti	es Exchang	ge Act of 1934,			
obligation may contin				•	<b>.</b>		of 1935 or Sectio	n		
See Instruc		30(h)	of the Inv	vestment (	Company	Act of 19	40			
1(b).										
(Print or Type R	esponses)									
(i iiii oi i jpo ii	esponses)									
1. Name and Address of Reporting Person <sup>*</sup> _2. Issuer Name <b>and</b> Ticker or Trading 5. Relationship of						Reporting Person(s) to				
ADDISON PAUL T			Symbol				Issuer			
			FIRSTENERGY CORP [FE]				(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction			(Check an applicable)				
76 SOUTH MAIN STREET			(Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify below) below)				
			05/12/2009							
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							
							6. Individual or Joint/Group Filing(Check Applicable Line)			
							_X_ Form filed by One Reporting Person			
AKRON, OH	I 44308						Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)								
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Date		2A. Deemed Execution Date, if		4. Securities nAcquired (A) or Disposed of (D)		5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial	
Security (Instr. 3)	(Month/Day/Year) Execution any		on Date, if	Code						
(Instr. 5)		•	/Day/Year)	(Instr. 8)	(Instr. 3,		-	Indirect (I)	Ownership	
							Following	(Instr. 4)	(Instr. 4)	
						(A)	Reported Transaction(s)			
				Code V	A	or (D) Drive	(Instr. 3 and 4)			
Common				Code V	Amount	(D) Price				
Stock							100	D		

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price o Derivativ Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	\$ 1 <u>(1)</u>	05/12/2009	А	514	(2)	(2)	Common Stock	514	\$ 41.9

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Mane / Maress	Director	10% Owner	Officer	Other			
ADDISON PAUL T 76 SOUTH MAIN STREET AKRON, OH 44308	Х						
Signatures							
Edward J. Udovich, POA	05/13/200	)9					
**Signature of Reporting Person	Date						

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) 1 for 1

(2) In accordance with the terms and conditions of the FirstEnergy Corp. Deferred Compensation plan for Outside Directors.

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