CAVALIER LYNNETTE M

Form 4 March 03, 2011

FORM 4

OMB APPROVAL OMB

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

3235-0287 Number: January 31, Expires:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

2005 Estimated average burden hours per

Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * CAVALIER LYNNETTE M			2. Issuer Name and Ticker or Trading Symbol FIRSTENERGY CORP [FE]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 76 SOUTH MAIN STREET			3. Date of Earliest Transaction (Month/Day/Year) 03/01/2011					Director 10% Owner X Officer (give title Other (specify below)			
				endment, D nth/Day/Yea	_	al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
AKRON, OH 44308								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any	med on Date, if Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/03/2011			Code V S	Amount 9,279 (4)	(D)	Price \$ 36.913	37 295 925	D		
Common Stock								5,469.813	I	By Savings Plan	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of SEC 1474											

information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	ctionSe D	Number of lecurities Acquisposed of (Instr. 3, 4, and	quired (A) or D)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title a Underlyi (Instr. 3
	Derivative Security							Date Exercisable	Expiration Date	Title
Dhantom				Code	V	(A)	(D) 5 070 142			Comm
Phantom 3/08d	\$ 1 <u>(1)</u>	03/01/2011		С			5,070.142 (3)	03/01/2008	03/01/2011	Comm Stocl
Phantom / Retirement	\$ 1 <u>(1)</u>	03/01/2011		C	5	,070.142 (3)		(2)	(2)	Comm

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CAVALIER LYNNETTE M 76 SOUTH MAIN STREET AKRON, OH 44308

Senior VP, Human Resources

Signatures

Edward J. Udovich, POA

**Signature of Reporting Date
Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- **(1)** 1 for 1
- (2) This transaction reflects the extension and vesting of phantom stock to retirement or other termination of employment under arrangements approved by the Compensation Committee.
- These transactions reflect the extension of the expiration date of phantom stock from 3/1/2011 to "retirement" under arrangements approved by the Compensation Committee and reflect the movement of stock from the Phantom 3/08D account to the "retirement" account.
- (4) This transaction reflects the sale of shares for taxes associated with the lapse of restricted stock.

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

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