### Edgar Filing: FIRSTENERGY CORP - Form 4

FIRSTENERGY C	CORP											
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November 12, 201	4											
FORM 4	UNITED	статес	SECU	DITIES		DEV		E COMMI	SION		PPROVA	۱L
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								510N	OMB Number:	3235-	0287	
Check this box if no longer subject to Section 16. Form 4 or					WNERSHI	P OF	Expires: Estimated burden hou response	average urs per	ry 31, 2005 0.5			
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	-	a) of the I	Public U	Itility Ho	oldin	g Cor		ange Act of et of 1935 or 1940		·		
(Print or Type Respons	ses)											
1. Name and Address of Reporting Person <u></u> JOHNSON JULIA L			2. Issuer Name <b>and</b> Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer						
			FIRSTENERGY CORP [FE] (Check a					all applicable)				
(Last) (First) (Middle) 76 SOUTH MAIN ST			3. Date of Earliest Transaction (Month/Day/Year) 11/07/2014			Offi	X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street) AKRON, OH 44308			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individ Applicable _X_ Form Form	<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
								Person				
(City) (St	tate)	(Zip)	Tab	le I - Non-	-Deri	vative	Securities	Acquired, Dis	posed of,	or Beneficia	lly Ownee	d
	saction Date /Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	onAc Di (In	sposed str. 3, 4	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction( (Instr. 3 and	Fc (E (I) (I)	Ownership orm: Direct )) or Indirect ) nstr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al ip
							(D) Price	e `				
Reminder: Report on a	separate line	tor each cla	ass of sec	urities ben		•	•	or indirectly.	collect	ion of	SEC 1474	
						inforn requir	nation cor ed to resp lys a curre	ntained in thi pond unless ently valid Ol	s form a the form	nre not n	(9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Instr.

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	Derivative Security				(A) or Disposed (D) (Instr. 3, and 5)						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units <u>(1)</u>	<u>(2)</u>	11/07/2014	А		1,449		(3)	(3)	Common Stock	1,449	\$ 36

### **Reporting Owners**

<b>Reporting Owner Name / Address</b>				
	Director	10% Owner	Officer	Other
JOHNSON JULIA L 76 SOUTH MAIN ST AKRON, OH 44308	Х			
Signatures				
Edward I				

•	
Edward J.	11/12/2014
Udovich, POA	11/12/2014

\*\*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) Represents shares paid quarterly for director compensation under the 2007 Incentive Compensation Plan and deferred pursuant to the Deferred Compensation Plan for Outside Directors

(2) 1 for 1

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

(4) Includes phantom stock units acquired through dividend reinvestments.

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.