

Jamshidi Ali  
Form 3  
June 08, 2006

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Jamshidi Ali		(Month/Day/Year)	FIRSTENERGY CORP [FE]	
(Last)	(First)	06/01/2006		
76 SOUTH MAIN STREET			4. Relationship of Reporting Person(s) to Issuer	
(Street)			(Check all applicable)	
AKRON, Â OH Â 44308			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below) Vice President	
(City)	(State)	(Zip)	5. If Amendment, Date Original Filed(Month/Day/Year)	
			6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	126.66	D	Â
Common Stock	2,973.06	I	By Savings Plan

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Phantom / Retirement	Â (2)	Â (2)	Common Stock	1,885.82	\$ 1 (1)	D	Â
Phantom 3/05D	02/25/2005	03/01/2008	Common Stock	1,150.119	\$ 1 (1)	D	Â
Phantom 3/06D	03/02/2006	03/02/2009	Common Stock	2,481.779	\$ 1 (1)	D	Â
Phantom3/04D	03/01/2004	03/01/2007	Common Stock	268.385	\$ 1 (1)	D	Â
RSUD2	03/01/2010	03/01/2010	Common Stock	285.024	\$ 1 (1)	D	Â
RSUD5	03/01/2011	03/01/2011	Common Stock	221.25	\$ 1 (1)	D	Â
RSUP1	03/01/2008	03/01/2008	Common Stock	1,507.564	\$ 1 (1)	D	Â
RSUP4	03/01/2009	03/01/2009	Common Stock	1,237.5	\$ 1 (1)	D	Â
Stock Options (Right to buy)	03/01/2004	03/01/2010	Common Stock	4,000	\$ 19.31	D	Â
Stock Options (Right to buy)	11/22/2004	11/22/2010	Common Stock	2,000	\$ 27.75	D	Â
Stock Options (Right to buy)	05/16/2005	05/16/2011	Common Stock	6,000	\$ 29.5	D	Â
Stock Options (Right to buy)	03/01/2004	03/01/2013	Common Stock	15,700	\$ 29.71	D	Â
Stock Options (Right to buy)	04/01/2003	04/01/2012	Common Stock	12,000	\$ 34.45	D	Â
Stock Options (Right to buy)	03/01/2005	03/01/2014	Common Stock	17,500	\$ 38.76	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Jamshidi Ali 76 SOUTH MAIN STREET AKRON, OH 44308	Â	Â	Â Vice President	Â

## Signatures

David W.  
Whitehead, POA

06/08/2006

  Signature of Reporting  
Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (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.
- (1) 1 for 1

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.