## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average bu	rden							

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							. ,				' '								
1. Name and Address of Reporting Person*  THOMAS PAUL D				2. Issuer Name <b>and</b> Ticker or Trading Symbol ALCOA INC [ AA ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
THOM	<u>AS PAU</u>	<u>L D</u>			1		711 11	<u></u>	7171 J						Direct	tor		10% O	wner
					3 0	)ate o	of Earlie	st Tran	nsaction (N	lonth/	Dav/Year			-	X Office below	er (give title		Other (	specify
(Last)	(F	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/03/2006								, xecutive V	ico I	,			
201 ISABELLA STREET			1	11/05/2000									10.	xecutive v	ice i	resident			
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ir	6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line	e)				·
PITTSB	URGH P.	A	15212												X Form	filed by One	Rep	orting Perso	on
														Form filed by More than One Reportir Person				orting	
(City)	(5	State)	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of	Security (Ins	tr. 3)		2. Trans	action		2A. Deer		3.		4. Secu	rities Acqu	ired (/	A) or	5. Amo				7. Nature
				Date (Month/I	Day/Ye	Execution Date,			e, Transaction Disposed Of (D) (Instr. Code (Instr. 5)			nstr. 3	, 4 and	Securit Benefic				of Indirect Beneficial	
(MOIN)				(	(Month/Day			Day/Ye			"				Following (I) (I		Instr. 4)	Ownership	
								Code	v	Amoun	(A) or (D)		Price	Transa (Instr. 3	ction(s)			(Instr. 4)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
		•							s, optio						• · · · · · · · ·				
1. Title of	2.		3A. Deeme	ed 4	4.	1.		5. Number			ble and	7. Title and			8. Price of		of	10.	11. Nature
Derivative Security	Conversion or Exercise		Execution if any		, Transac				Expiration Date (Month/Day/Year)			Amount of Securities			Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial
(Instr. 3) Price of (Month/Day/Year) If any (Month/Day/Year				8)	` Securities		Underlying					(Instr. 5)	Beneficially		Direct (D)	Ownership			
Derivative						Acquired Derivative Secu						urity		Owned Following		or Indirect	(Instr. 4)		
Security						(A) or Unstr. 3 and 4) of (D)								Reported Transaction(s)		(I) (Instr. 4)			
					(Instr. 3, 4 and 5)										(Instr. 4)				
														ount					
													or Nur	nber					
				- [.	Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	of Sha	ares					
Phantom Stock	(1)	11/03/2006			A		96		(2)		(2)	Common Stock	9	96	\$28.545	2,158		D	
Units	I	1	I				1 1	1	1	- 1		I Stock	1	- 1		1			1

## **Explanation of Responses:**

- 1. 1 For 1
- 2. Phantom stock units were acquired under the Alcoa Deferred Compensation Plan and are to be paid out in cash after termination of employment. The reporting person may transfer the phantom stock into an alternative investment account under the Plan at times permitted under the Plan.

## Remarks:

Brenda Hart (Assistant Secretary), by power of

11/06/2006

attorney

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.