FORM 5

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | $D \subset$ | 205/10 |
|--------------|-------------|--------|
| wasiiiigton, | D.C. | 20549 |

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0362 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 1.0 | | | | | | | | |

Form 3 Holdings Reported.

| X Form 4 | Transactions | Reported. | Fil | ed pursuant t or Sectio | | | | | urities Excha Company Ac | | | | | | | | |
|--|---|--|---|---|---|--------|--|------|---|----------------|---|--|--|--|--|--|--|
| 1. Name and Address of Reporting Person* GHOSN CARLOS | | | | 2. Issuer Name and Ticker or Trading Symbol ALCOA INC [AA] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| | | | | | | | | | | | X Director | | | 10% | Owner | | |
| (Last) | (F BELLA ST | , | (Middle) | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008 | | | | | /ear) | Officer (give title below) | | | Other (specify below) | | | |
| | | | | _ 4. If Amer | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | t) FSBURGH PA 15212 | | | | | | | | | | | -, | rm filed by | porting Pe | erson | | |
| | | | - | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (5 | State) (| (Zip) | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date [[(Month/Day/Year)] | | Execution D | Execution Date, if any | | Transaction Code (Instr. | | 4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5) | | or Disposed | Secui Bene | | es Own ially Form | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | (MOHUI/Day/Teal) | | ur) 8) | | Amou | unt | (A) or (D) | Price | Issue | 's Fiscal nstr. 3 and | iscal Indirect | | t (I) (Instr. 4) . | | |
| 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 Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of 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 Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | derivation de la deriva | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | (A) | A) (D) | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Restricted Stock | (2) | 11/13/2008 | | 4A | 50 | | 11/13/20 | 009 | 11/13/2009 | Commo Stock | n 50 | \$0 | | 50 | D | | |

Explanation of Responses:

- 1. Granted under the Directors Plan: "You Make a Difference Award."
- 2. Each restricted stock unit represents a contingent right to receive the cash value of one share of Alcoa Inc. common stock on a 1-for-1 basis, payable in cash after a one-year vesting period.

Remarks:

Brenda Hart (Assistant Secretary), by power of

01/27/2009

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.