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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | | | | | | | |
|--------------|--|----------|---|--|--|--|--|--|--|--|--|
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| I | | 5255-0201 |
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| | Estimated average burde | en |
| | hours per response: | 0.5 |
| | | |

| 1. Name and Address of Reporting Person* | 2. Issuer Name and Ticker or Trading Symbol ALCOA INC. [AA] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | | |
|--|--|---|--|--|--|--|--|--|--|--|--|
| <u>Jarrault Olivier M</u> | ALCOA INC. [AA] | Director 10% Owner | | | | | | | | | |
| (Last) (First) (Middle) 390 PARK AVENUE | 3. Date of Earliest Transaction (Month/Day/Year) 04/25/2016 | X Officer (give title Other (specify below) below) Executive Vice President | | | | | | | | | |
| (Street) NEW YORK, NY 10022 (City) (State) (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | | | 5) | | | Disposed Of (D) (Instr. 3, 4 and | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Direct Indirect Reneficial Ownership (Instr. 4) | |
|---|--|--|-----------------------------|--|------------|---|---------|---------|---|----------------------------------|--|--|---|---|---|--|
| | | Code V Amount (A) or (D) Price Reported Transaction(s) (Instr. 3 and 4) | | | (instr. 4) | | | | | | | | | | | |
| Common Stock | 04/25/2016 | | S | | 12,810 | D | \$10.23 | 352,889 | D | | | | | | | |
| Common Stock | | | | | | | | 20,450 | I | By Company 401(k) Plan | | | | | | |
| 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 Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

Remarks:

<u>/s/ Margaret Lam (Assistant</u> <u>Secretary), by power of</u> <u>attorney</u>

04/26/2016

** 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.