FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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 Se	ection	1 30(f1)	or the	investmen	t Con	npany Ac	01 1940								
1. Name and Address of Reporting Person* CHANATRY MICHAEL NIEM					2. Issuer Name and Ticker or Trading Symbol Howmet Aerospace Inc. [ HWM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
CHAIN	AIKI W	ICHALL NII	<u> </u>								-				Directo			10% Ov		
-														X	Officer below	(give title		Other (s below)	pecify	
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)															
201 ISA	BELLA ST	REET			09/30/2022									Vice President						
SUITE 2	200																			
JOIL 2	.00			ľ	4 If A	Amen	dment	Date	of Original	Filed	(Month/Γ	av/Year)	6	Indi	vidual or	Joint/Group	Filino	(Check Ap	plicable	
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(Street)	uncu n		15010 5070	,										X	Form	filed by One	Repo	orting Perso	n	
PHTISB	URGH PA	A	15212-5872	•											Form	filed by Mor	e thar	One Repo	rting	
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(City)	(S	state)	(Zip)																	
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1. Title of Security (Instr. 3) 2. Transac				ction 2A. Deemed 3. 4. Securities Acquired (A) Execution Date, Transaction Disposed Of (D) (Instr. 3,									5. Amou Securitie				7. Nature of Indirect			
(Month/Da									Code (Instr. 5)			Ju. 0, 4 c	Benefici		ally (D) o	(D) or	or Indirect   I	Beneficial		
				(Monti			ay/Yea	r) 8)		<del>                                     </del>				Reporte	Following d	(I) (Instr. 4)		Ownership (Instr. 4)		
						Code	V Amount (A) or (D)			r Pric	Price Transac (Instr. 3				- 1					
												(D)			(IIIsti. 3	allu 4)				
		Т	able II - De						,			,		•	Owned					
			(e	.g., pu	ts, c	alls,	war	rants	, option	s, c	onverti	ible sec	urities	5)						
1. Title of	2.	3. Transaction	3A. Deemed	4.	4.		5. Number		6. Date Exercisable and			7. Title and		8.	Price of	9. Number	of	10.	11. Nature	
Derivative	Conversion or Exercise	Date	Execution Da		Transaction Code (Instr. 8)		on of tr. Derivative Securities Acquired		Expiration Date (Month/Day/Year)			Amount of			erivative derivative ecurity Securitie			Ownership	of Indirect	
Security (Instr. 3)	Price of	(Month/Day/Year)	if any (Month/Day/\									Securities Underlyin		(Instr. 5)		Beneficially		Direct (D)	Beneficial Ownership	
	Derivative											Derivative Secur		ity		Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)	
Security						(A) or Instr. 3 and 4) Disposed										Reported		(1) (11150. 4)		
						of (D) (Instr. 3, 4										Transaction(s) (Instr. 4)	n(s)			
							and 5)								(					
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				Co	ode \	V	(A)	(D)	Exercisabl	e D	ate	Title	Shares							
Phantom Stock	(1)	09/30/2022			,		482		(2)		(2)	Common	482		\$31.155	42,268		D		
Units	(.)	09/30/2022			A		402		(2)		(2)	Stock	402		υ.1.1.0	42,208		D		

## **Explanation of Responses:**

- 1. Each phantom stock unit is the economic equivalent of one share of Howmet Aerospace common stock.
- 2. Phantom stock units were acquired under the Howmet Aerospace Deferred Compensation Plan and will be paid out in case after termination of employment. The reporting person may transfer the phantomstock units into an alternative investment account under the plan at times permitted under the plan.

/s/ Margaret Lam, Assistant Secretary / Attorney-in-fact

10/04/2022

\*\* Signature of Reporting Person

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.