## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

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*  REITAN BERNT					2. Issuer Name and Ticker or Trading Symbol ALCOA INC [ AA ]										neck all a Dir	ationship of Reporting all applicable)  Director  Officer (give title		10% C	Owner
(Last) 201 ISAE		,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/17/2008										below)		Other (specify below) Vice President	
(Street) PITTSBU (City)			15212 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									e) X Fo	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
Table I - Non-Derivation 1. Title of Security (Instr. 3)  2. Transa Date (Month/D				action	Execution Date, ay/Year) if any			3. Transa Code (	ction	4. Securities Acquired (A) on Disposed Of (D) (Instr. 3, 4)				5. Ar Secu	nount of irities ificially ed Following	Fori	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				04/45					Code	v	Amount	(D)		Price	Tran (Inst	ransaction(s) Instr. 3 and 4)		<u></u>	(1130.4)
	Common Stock Common Stock			01/17	/2008	2008			A		28,500		A	\$0		1,342		I	By Company 401 (K) Plan
		Ta						•			sed of, o			•	Owne	d		•	
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security		3A. Deem Execution if any (Month/Da	n Date,	4. Transa Code ( 8)			ative rities ired osed	6. Date E Expiratio (Month/D	n Date				8. Price o Derivative Security (Instr. 5)		у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code V (A)		(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber								

Explanation of Responses:

Remarks:

Brenda Hart (Assistant Secretary), by power of attorney

01/18/2008

\*\* 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.