FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasnii	igion,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	OVAL
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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Schell J Michael					2. Issuer Name and Ticker or Trading Symbol ALCOA INC [AA]									5. Relationshi (Check all app Direc		licable)	ng Per	rson(s) to Is			
(Last) 201 ISAE		(First)	`	Middle)		3. Da 01/2			t Transa	action (M	onth/I	Day/Year)					X Officer (give title below) Executive V			Other (specify below) Vice President	
(Street) PITTSBU (City)	JRGH	PA (State)		5212 Zip)		4. If A	men	dment, Date of Original Filed (Month/Day/Year)							. Indivine)	Form Form	ual or Joint/Group Filing (Check Applicable 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. Transa Date (Month/D				Execution Date,				4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			and Securiti Benefic		urities F eficially (I ned Following (I		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
										Code	v	Amount	(A) or (D) P		Price	•	Transa	ed ction(s) 3 and 4)			(111501.4)
Common Stock 01				01/21/	2010				A		102,75	0	A	\$	\$0 2		235,287		D		
Common Stock																1,224			I	By Company 401(k) Plan	
			Ta						•			sed of, o				y Ov	wned				
Derivative Conversion Date Ex. Security Or Exercise (Month/Day/Year) if a			3A. Deem Execution if any (Month/Da	Date, Transaction			on of		6. Date Exercisab Expiration Date (Month/Day/Year)		Amount of		nt of ities lying ative ity (Ins	Di Si (li		rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C C C C C C C C C C C C C C C C C C C	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Evolunation						Code	,	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

Remarks:

Brenda Hart (Assistant Secretary), by power of attorney

01/25/2010

** 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.