FORM 4

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	D.C. 20549
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	CIVID 7 W T T
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:

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

1. Name and Address of Reporting Person* MCLANE CHARLES D							2. Issuer Name and Ticker or Trading Symbol ALCOA INC [AA]										tionship of Reportir all applicable) Director Officer (give title		ng Person(s) to Issu 10% Owr Other (sp		Owner
(Last) 201 ISAE		(Firs	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/04/2010										below) below) Executive VP and CFO				
(Street) PITTSBU (City)		PA (Stat		.5212 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indi ine) X	Forn Forn	I or Joint/Group Filing (Check Applica orm filed by One Reporting Person orm filed by More than One Reporting erson			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)) E>	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.					4 and Sec Ben Owr		5. Amount of Securities Beneficially Owned Following Reported		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount	() (I	A) or D)	Price	Transa		ction(s) 3 and 4)			(
Common	Stock				05/04/	05/04/2010				F		8,789		D	\$12	\$12.58		329,808		D	
Common Stock																	8,118			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)	ivative Conversion Date Execution Date, Transurity or Exercise (Month/Day/Year) if any Code					Transa Code (I	nsaction of Deri Sec Acq (A) of Disp of (E		osed . 3, 4	6. Date E Expiration (Month/E	on Dat	e Am ar) Sec Und Der Sec		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Deri Sec	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code						Expiration Date	Amoun or Numbe of Shares		mber						

Explanation of Responses:

Remarks:

Brenda Hart (Assistant Secretary), by power of attorney

05/05/2010

** 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.