FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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SENERICIAL OWNERCHIR	OMB Number	3235-028

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Section 3 obligation	Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMEN	OMB Number: Estimated average burde					
	obligations may continue. See Instruction 1(b).	Filed	pursuant to Section 16(a) of the Securities Exchange Act of 1934		hours per response:	0.5		
	, ,		or Section 30(h) of the Investment Company Act of 1940					
Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer				

1. Name and Address of Reporting Person KLEINFELD KLAUS						ALCOA INC [AA]									check all a	oplicable) ector	10% O		wner	
(Last) 201 ISAE	(F BELLA ST	, ,	Middle)			ate o		st Trans	saction (Month/Day/Year)							Officer (give title below) President & COO				
(Street) PITTSBU (City)	JRGH P.	tate) (Zip)	n-Deriv	-						d (Month/Da		,	Li	ne) X Fo Fo Pe	or Joint/Grou rm filed by On rm filed by Mo rson	e Reportino) Pers	on	
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2. E	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			A) or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)		Price	Tran	saction(s) c. 3 and 4)			(111501. 4)	
Common	Common Stock			01/17/2008					A		100,00	00 A		\$0) :	139,755	D	D		
Common	Stock															370	I		By Company 401(k) Plan	
		Та									sed of, onvertib				y Owne	d				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution D curity or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price o Derivative Security (Instr. 5)		Owner Form: Direct or Ind (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Ï	Code	v	(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

Date

** 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.