FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPROVAL | | | | | | | | |
|---|------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| | Estimated average burd | len | | | | | | | |
| l | 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* KOLLATZ CHRISTOPH | | | | | | 2. Issuer Name and Ticker or Trading Symbol ALCOA INC. [AA] | | | | | | | | | theck all ap Dire | plicable) ctor | 1 | Person(s) to Issuer 10% Owner Other (speci | |
|---|---|--|------------|--|-------|--|---|---|---|--------|---------------------|---|-------------|-------------------|---|---|--|---|--|
| (Last) (First) (Middle) 390 PARK AVENUE | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/19/2016 | | | | | | | | | Officer (give title below) Other (below) Executive Vice President | | specily | |
| (Street) NEW YORK, NY 10022 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) X Fori Fori | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - Non | n-Deriv | ative | Se | curitie | es Ac | quired, | Dis | posed o | f, or | Bene | ficia | lly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | | | nd Secui Benet | icially d Following | 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 | Trans | action(s) 3 and 4) | | | (1130.4) |
| Common Stock 01/19/ | | | | | | | ′2016 | | A | | 51,040 | | Α | \$(|) ! | 59,380 | | | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | y Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | recution Date, Tany Coonth/Day/Year) 8 | | ansaction of Deriv. Securi Acqu (A) or Dispo of (D) (Instr. and 5 | | vative irities ired r osed) | 6. Date E Expiratio (Month/D | n Date | • | Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form: Direct (or Indir (I) (Inst | D) ect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

Remarks:

Margaret Lam (Assistant Secretary), by power of

01/21/2016

attorney

** 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.