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KLEINFEL	D KLAUS										
Form 4											
July 05, 201								0145.4			
FORM	14_{INITED}	STATES (SECU	DITIES	AND EV	CHANCE	E COMMISSIO	NT.	PPROVAL		
	UNITED	STATES		shington				N OMB Number:	3235-0287		
Check t	his box		vv a	isinington	, D.C. 20	JJ - J			January 31,		
if no lo		MENT OF	CHAN	NGES IN	BENEF	Expires:	2005				
subject Section	10			SECUI		Estimated burden hou					
Form 4								response	•		
Form 5							nge Act of 1934,				
obligati may cor				•	•	· ·	of 1935 or Secti	on			
See Inst		30(h) o	of the II	nvestmen	t Compai	ny Act of 1	1940				
1(b).											
(Print or Type	Responses)										
				er Name an	d Ticker or	Trading	5. Relationship of Reporting Person(s) to				
KLEINFE	LD KLAUS		Symbol				Issuer				
		1	ALCO.	A INC [A	AJ		(Che	eck all applicabl	e)		
(Last)	(First) (of Earliest T	ransaction						
201 ISABI	ELLA STREET						X_ Director X Officer (gi	_X_ Director 10% Owner _X_ Officer (give title Other (specify			
201 ISADI	ELLA STREET	(J7/01/2	2011			below)	below)			
								airman and CEC			
			Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
			onth/Day/Yea	ar)		Applicable Line) _X_ Form filed by One Reporting Person					
PITTSBUI	RGH, PA 15212						Form filed by	More than One R			
							Person				
(City)	(State)	(Zip)	Tab	le I - Non-J	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	1	3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution D	Date, if		onAcquired		Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Day	(Year)	Code (Instr. 8)	Disposed		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(monus Duj	/1041)	(Instr. 0)	(11541.5,	rund 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(
Reminder: Re	port on a separate line	e for each clas	ss of sec	urities bene	ficially ow	ned directly	or indirectly.				
					Perso	ons who res	spond to the colle		SEC 1474		
					inform	nation cont	tained in this form	n are not	(9-02)		

information contained in this form are not (9-0) required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onof	Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security	erivative		(Instr.	. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)							(Instr. 5)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	(1)	07/01/2011		А		447		(2)	(2)	Common Stock	447	\$ 16.12

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
KLEINFELD KLAUS								
201 ISABELLA STREET	Х		Chairman and CEO					
PITTSBURGH, PA 15212								
Signatures								
Brenda Hart (Assistant Secreta attorney	ower of	07/05/2011						
<u>**</u> Signature of Reporting	Date							

Explanation of Responses:

- * 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).
- (1) 1 For 1

Phantom stock units were acquired under the Alcoa Deferred Compensation Plan and are to be paid out in cash after termination of

- (2) employment. The reporting person may transfer the phantom stock into an alternative investment account under the Plan at times permitted under the Plan.
- (3) As of 07/01/2011, the reporting person also held 3,380.7448 phantom stock units under the Alcoa Deferred Fee Plan for Directors which are to be paid out in cash after Board service ends.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.