## Edgar Filing: Arconic Inc. - Form 4

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Form 4	2016											
FORM	<b>4</b> UNITED S	TATES S	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB APPROVAL OMB 3235-028 Number:		
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation: may contin <i>See</i> Instruct 1(b).	Filed purs Section 17(a	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Expires:January 31 2005Estimated average burden hours per response0.5		
(Print or Type Ro	esponses)											
GUPTA RAJIV Symbol Arconic			ymbol	Name and T		Fradin	g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				_	-							
(Last) (First) (Middle) 3. Date of (Month/D 390 PARK AVENUE 11/30/20				y/Year)	nsaction			XDirector10% Owner Officer (give titleOther (specify below)below)				
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEW YORK	K,, NY 10022							Form filed by M Person	More than One Ro	eporting		
(City)	(State) (	Zip)	Table	I - Non-De	erivative S	ecuri	ties Aco	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				Securities Beneficially Owned	5. Ownership Form: Direct D) or ndirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	11/30/2016			А	3,112	А	\$0	3,112 <u>(1)</u>	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.		6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumł	ber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of		(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative	e		Secur	ities	(Instr. 5)	Bene
	Derivative		-		Secur	rities			(Instr.	3 and 4)		Owne
	Security				Acqu	ired						Follo
					(A) o							Repo
					Dispo							Trans
					of (D							(Instr
					(Instr	·						(
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					i, une	<i>a                                    </i>						
				Code V	(A)	(D)	Date	Expiration	Title	Amount		
							Exercisable	Date		or		
										Number		
										of		
										Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships								
	Director	10% Owner	Officer	Other					
GUPTA RAJIV									
390 PARK AVENUE	Х								
NEW YORK,, NY 10022									
Signatures									
(a) Margaret I am (Assistant Secretary) by power of									

/s/ Margaret Lam (Assistant Secretary), by power of attorney

\*\*Signature of Reporting Person

12/02/2016 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).
- On October 5, 2016, Arconic Inc. (formerly, Alcoa Inc.) effected a 1-for-3 reverse stock split of its Common Stock. The amount of (1) securities reported on this Form 4 have been adjusted to reflect the reverse stock split.

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.