## Edgar Filing: Hess David P - Form 4

Hess David P

| Form 4<br>January 04, 20   | )19                                     |  |  |  |              |                                |                                   |  |  |          |  |
|--|---|--|--|--|--------------|--------------------------------|-----------------------------------|--|--|----------|--|
|  |   |  |  |  |              |                                |                                   |  | OMB APPROVAL   |          |  |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549<br>Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b). |   |  |  |  |              |                                | OMB<br>Number:                    | 3235-0287  |  |          |  |
|  |   |  |  |  |              |                                | e Act of 1934,<br>1935 or Sectior | Expires: January 31<br>2009<br>Estimated average<br>burden hours per<br>response 0.5                               |  |          |  |
| (Print or Type Re  | esponses)                               |  |  |  |              |                                |                                   |  |  |          |  |
| Hess David P S   |   |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>Arconic Inc. [ARNC] |  |              |                                | ıg                                | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                                      |  |          |  |
| (Last)   | (First) (M                              | liddle)                                  | 3. Date of Earliest Transaction  |  |              |                                |                                   | (Check an applicable)  |  |          |  |
| 390 PARK AVENUE  |   |  | (Month/Day/Year)<br>01/03/2019   |  |              |                                |                                   | X_ Director 10% Owner<br>Officer (give title Other (specify<br>below) below)                                       |  |          |  |
|  |   |  |  | nendment, Date Original<br>Ionth/Day/Year)       |              |                                |                                   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_Form filed by One Reporting Person             |  |          |  |
| NEW YORK   | ,, NY 10022                             |  |  |  |              |                                |                                   | Form filed by M<br>Person  | ore than One Re  | porting  |  |
| (City)   | (State) (                               | Zip)                                     | Table  | e I - Non-D                                      | erivative S  | Securi                         | ities Acq                         | uired, Disposed of   | , or Beneficial  | ly Owned |  |
|  | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deen<br>Execution<br>any<br>(Month/E | n Date, if   | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V | (Instr. 3, 4 | sposed<br>4 and 3<br>(A)<br>or | d of (D)                          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |          |  |
| Common<br>Stock  | 01/03/2019                              |  |  | А  | 2,346        | A                              | \$<br>18.43                       | 144,939  | D  |          |  |
| Common<br>Stock  |   |  |  |  |              |                                |                                   | 44,166   | I  | By Trust |  |
| Common<br>Stock  |   |  |  |  |              |                                |                                   | 2,666  | Ι  | By Trust |  |

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.

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Amou<br>Unde<br>Secur | le and<br>unt of<br>rlying<br>rities<br>. 3 and 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Own<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|---------------------|--------------------|-----------------------|--|---|--|
|   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title                 | Amount<br>or<br>Number<br>of<br>Shares             |   |  |

## **Reporting Owners**

| Reporting Owner Name / Address                         |            | Relationsh |         |       |
|--|------------|------------|---------|-------|
|  | Director   | 10% Owner  | Officer | Other |
| Hess David P<br>390 PARK AVENUE<br>NEW YORK,, NY 10022 | Х          |            |         |       |
| Signatures   |            |            |         |       |
| /s/ Margaret Lam (Assistant Se<br>attorney             | 01/04/2019 |            |         |       |

\*\*Signature of Reporting Person

## **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) Shares held in a revocable trust, of which the reporting person and his spouse are trustees and beneficiaries.
- (2) Shares held in a charitable remainder unitrust, of which the reporting person and his spouse are trustees and beneficiaries.

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.

Date