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KAISER AI Form 4 April 16, 20	LUMINUM COI 10	RP									
								OMB APPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check th if no lon, subject to Section 1 Form 4 of Form 5 obligation may con <i>See</i> Instr 1(b).	ger o 16. or Filed pu tinue. Section 17	MENT OF Irsuant to S 7(a) of the 1 30(h)	Expires:January 31, 2005Estimated average burden hours per response0.5								
(Print or Type	Responses)										
	Address of Reportin Retirees of Kaise	-	Symbol	R ALUM	d Ticker or T IINUM CO	-	>	5. Relationship of l Issuer (Check	Reporting Pers		
MELLON,	^(First) BANK OF NEW TRUSTEE, ON CENTER, ROO	E		f Earliest T Day/Year) 2010	ransaction		1	Director Officer (give t pelow)	X10% itleOthe below)	6 Owner er (specify	
PITTSBUR	(Street) CGH, PA 15258	Filed(Mc			ate Original r)		-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
]	Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	ecurit	ies Acqu	ired, Disposed of,	or Beneficial	ly Owned	
(Instr. 3) any) Execution	Date, if	3. 4. Securities Acquired (Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)))	 A) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) 	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	04/14/2010			S	142,013	D	\$ 40.06 (1)	4,146,626	D		
Common Stock	04/15/2010			S	7,108	D	\$ 40.8 (2)	4,139,518	D		

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

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
Repo	rtina O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / AddressRelations-intermediateDirector10% OwnerOfficerOtherVEBA for Retirees of Kaiser Aluminum
C/O THE BANK OF NEW YORK MELLOON, TRUSTEB
ONE MELLOON CENTER, ROOM 151-1935
PITTSBURGH, PA 15258XXXSignaturesSignaturesXXXX

/s/ Bernadette T. Rist for The Bank of New York Mellon, successor to Mellon Bank, N.A., solely in its capacity as Trustee for the VEBA for Retirees of Kaiser Aluminum Trust (as directed by the Investment Fiduciary), and not in its individual capacity

**Signature of Reporting Person

04/16/2010

Date

Explanation of Responses:

3

- * 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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$39.75 - \$40.67, inclusive. The reporting person undertakes to provide to Kaiser Aluminum Corp., any shareholder of Kaiser

(1) Aluminum Corp., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (1) to this Form 4.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$40.75 - \$40.87, inclusive. The reporting person undertakes to provide to Kaiser Aluminum Corp., any shareholder of Kaiser

Aluminum Corp., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (2) to this Form 4.

Remarks:

Explanation of Responses:

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The filing of this statement shall not be construed as an admission (a) that the person filing this statement is, for the purpose of 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. font> OtherMARSHALL CARY P 1717 S. BOULDER AVENUE SUITE 600 TULSA, OK 74119 VP Corporate Finance

Signatures

/s/ Cary P. Marshall by Megan Cordle, pursuant to power of attorney dated September 6, 05/16/2006

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).

**Signature of Reporting Person

(1) The Phantom units are to be settled in either cash or ARLP common units, at the election of the Compensation Committee, upon the reporting person's death or termination.

(2) 1 for 1

- (3) The Restricted units will vest on December 31, 2006 provided that the issuer meets certain financial tests. Once vested the restricted units are to be settled in ARLP common units.
- (4) Not applicable
- (5) The Restricted units will vest on January 1, 2008 provided that the issuer meets certain financial tests. Once vested the restricted units are to be settled in ARLP common units.
- (6) The Restricted units will vest on January 1, 2009 provided that the issuer meets certain financial tests. Once vested the retricted units are to be settled in ARLP units.

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