## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

d	l pursuant	to Section	16(a) of	the Securities	Exchange Act of 1934	÷

Check this box if Section 16. Form obligations may o Instruction 1(b).		STA		l pursua	F CHANGES nt to Section 16(a) ction 30(h) of the Ir	of the S	ecurit	es Exchange	Act of 19			Estimat	lumber: ted average burd per response:	3235-0287 ien 0.5	
1. Name and Addres	ss of Reporting Perso		er Name <b>and</b> Ticke son Transmiss					all applicable)	, 10% Owne		Dwner				
(Last) (First) (Middle) C/O ALLISON TRANSMISSION HOLDINGS,					e of Earliest Transa /2024	ction (M	lonth/I	Day/Year)	X	Officer (give below) SV	ive title Other (specify below) VP, Global MSS				
INC. ONE ALLISON WAY					<ul> <li>4. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check App Line)</li> <li>X Form filed by One Reporting Person Form filed by More than One Report</li> </ul>								on		
(Street) INDIANAPOLIS IN 46222					Rule 10b5-1(c) Transaction Indication										
(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
	Т	able I - No	n-Deriva	ative S	Securities Acq	uired,	, Dis	posed of,	or Ben	eficially	Owned				
1. Title of Security (Instr. 3) Date (Month/Date)					2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Follow		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	<ul> <li>Reported Transaction(s) (Instr. 3 and 4)</li> </ul>			(Instr. 4)	
Common Stock				2024		М		7,944	A	(1)	20,732		D		
Common Stock 02				2024		F		2,312(2)	D	\$75.59	18,420		D		
Common Stock											8,906		Ι	By John Coll Living Trust dated 5/2/2005	

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. Transa Code ( 8)		of		6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Performance Stock Units	(1)	02/28/2024		М			7,944	(1)	(1)	Common Stock	7,944	\$ <b>0</b>	0	D	

Explanation of Responses:

1. Settlement of performance-based restricted stock units ("PSUs") granted on February 10, 2021. Each PSU represents a contingent right to receive one share of Allison Transmission Holdings, Inc. ("ALSN") common stock

2. Represents shares withheld by ALSN to satisfy tax withholding obligations on the vesting of PSUs.

/s/ Preston B. Ray, attorney-in-03/01/2024 fact

\*\* 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.