FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
l	hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Bohley G Frederick  (Last) (First) (Middle)							2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ ALSN ]  3. Date of Earliest Transaction (Month/Day/Year)									all app	licable) tor er (give title v)	below)		wner (specify
ONE ALLISON WAY  (Street) INDIANAPOLIS IN 46222  (City) (State) (Zip)						04/26/2019  4. If Amendment, Date of Original Filed (Month/Day/Year)									Indivi ne) X	,				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						tion 2A. Deemed Execution Date,			3. Transa Code (1 8)	ction	posed of, or Benefic 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				or 5. Am Secu Bene Owne		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
Common	Stock	2019	2019			Code	v	Amount 5,000	(A) (D)		Price	Reported Transaction (Instr. 3 and		action(s) 3 and 4)	D		(Instr. 4)			
Common Stock										3,333					360		I		By Spouse	
	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. Deem Execution if any (Month/D	n Date,	Code (Ins				6. Date E Expiration (Month/E	n Dat				Deriv	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		nber ires								

**Explanation of Responses:** 

Remarks:

/s/ Jacalyn C. Bolles, attorneyin-fact

\*\* Signature of Reporting Person

Date

04/30/2019

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.