Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burden										
-	houre per reenonee	. 0.5									

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* Graziosi David S. (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN] 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024									Officer (give title Other (specify					
C/O ALLISON TRANSMISSION HOLDINGS, INC. ONE ALLISON WAY						4. If Amendment, Date of Original Filed (Month/Day/Year)								3. Indiv ine)	lividual or Joint/Group Filing (Check Applicable				
(Street) INDIANAPOLIS IN 46222				Ru	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					$ _{\Box}$	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.													
		Table	I - I	Non-Deriva	tive	Secui	rities	Ac	quir	ed, Di	sposed o	f, or l	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes					Execution Date,		n Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Secu Bene Own		icially d Following	For (D) (Indi	m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							(Code	V Amount (A) or (D)		Price		Transa	Reported Transaction(s) Instr. 3 and 4)		u. 4)	(IIIsti. 4)		
Common	Stock			02/16/202	4			s 66		66,623	D	\$71.02	\$71.0213 ⁽¹⁾		119,284		D		
Common Stock 02/16/2024					:4			S		1,443	D	\$71.53	5326(2)		117,841		D		
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)	Exe if ar	Deemed cution Date, ny nth/Day/Year)		action (Instr.	Str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Ex ₁ (Mo	piration onth/Day	(Year)	e Amor ar) Secu Unde Deriv Secu 3 and		of Der Secting (Instruction)				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. The price reported is a weighted average price. The shares were sold in multiple transactions at per share prices ranging from \$70,4600 to \$71,4500. The reporting person undertakes to provide Allison Transmission Holdings, Inc. ("ALSN") 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. The price reported is a weighted average price. The shares were sold in multiple transactions at per share prices ranging from \$71.4800 to \$71.5900. The reporting person undertakes to provide ALSN 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.

/s/ Preston B. Ray, attorney-in- 02/20/2024 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.