## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
	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

					OI 3	Secu	)II 30(II) C	or trie	investment C	ompan	iy Act	01 1940							
Name and Address of Reporting Person*     Scroggins Eric C.						2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ ALSN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
octoggins Effe C.														Officer	tor er (give title		10% Ow Other (s		
(Last)		3. Date of Earliest Transaction (Month/Day/Year)								below)	below) below)								
(Last) (First) (Middle) ONE ALLISON WAY						03/11/2013								VP, Gen. Counsel and Secretary					
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
INDIANAPOLIS IN 46222												2	X Form filed by One Reporting Person						
(City) (State) (Zip)													Form filed by More than One Reporting Person						
		Tab	le I - Non-	-Deriva	ative	Sec	curities	s Ac	quired, Di	spos	ed o	f, or Bei	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,			Transaction Disposed Code (Instr. 5)			ies Acquire Of (D) (Inst		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code V	Am	mount (A) or (D)		Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)		
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 D if any (Month/Day)	Co	ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)		and	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e C s F ally C g (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	ode	v	(A)	(D)	Date Exercisable	Expira Date	ation	Title	Amount or Number of Shares						
Dividend Equivalent Rights	(1)	03/11/2013			A		40.018		(1)	(1)	1)	Common Stock	40.018	\$0	40.01	8	D		
Dividend Equivalent Rights	(2)	05/31/2013			A		91.891		(2)	(2)	2)	Common Stock	91.891	\$0	131.90	)9	D		

#### **Explanation of Responses:**

- 1. The dividend equivalent rights accrued on one previously awarded restricted stock unit ("RSU") and vest proportionately with the RSUs to which they relate. Each dividend equivalent right is the economic equivalent of one share of Allison Transmission Holdings, Inc. common stock.
- 2. The dividend equivalent rights accrued on two previously awarded RSUs and vest proportionately with the RSUs to which they relate. Each dividend equivalent right is the economic equivalent of one share of Allison Transmission Holdings, Inc. common stock.

### Remarks:

Eric C. Scroggins

06/04/2013

\*\* 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.