SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address Dean Sharon L	1 0	*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Allison Transmission Holdings Inc</u> [ ALSN ]		tionship of Reporting Perso all applicable) Director	on(s) to Issuer 10% Owner	
(Last) ONE ALLISON V	(First) NAY	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/03/2014	Х	Officer (give title below) VP, Quality and Re	Other (specify below) eliability	
(Street) INDIANAPOLIS	IN	46222	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filing Form filed by One Repor Form filed by More than	ting Person	
(City)	(State)	(Zip)			Person		

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	07/03/2014		М		1,775	A	\$8.44	12,970	D	
Common Stock	07/03/2014		М		6,483	A	\$12.66	19,453	D	
Common Stock	07/03/2014		<b>S</b> <sup>(1)</sup>		8,258	D	\$31.9327(2)	11,195	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deri Sec Acq (A) ( Disp of (I	oosed D) tr. 3, 4	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				
Employee Stock Option (right to buy)	\$8.44	07/03/2014		М			1,775	(3)	09/30/2017	Common Stock	1,775	\$0	0	D	
Employee Stock Option (right to buy)	\$12.66	07/03/2014		М			6,483	(3)	09/30/2017	Common Stock	6,483	\$0	16,034	D	

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.

2. The price reported is a weighted average price. These shares were sold in multiple transactions at per share prices ranging from \$31.8500 to \$32.0000. The reporting person undertakes to provide the Company, any security holder of the Company or the staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote. 3. The option vested in five equal annual installments beginning on August 7, 2008.

## **Remarks:**

<u>/s/ Eric C. S</u>	<u>Scroggins</u>	<u>, attorney-</u>	07/07/2014
in-fact			0//0//2014

\*\* 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.