FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number:

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Sectior	1 30(h)	of the	Ínvestm	ent C	ompany Act	of 1940						
1. Name and Address of Reporting Person* <u>STAR JAMES A</u>						2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN]								5. Relationship of Reporting Person(s) (Check all applicable) X Director 16			,	lssuer Owner
(Last) (First) (Middle) C/O ALLISON TRANSMISSION HOLDINGS INC ONE ALLISON WAY						3. Date of Earliest Transaction (Month/Day/Year) 05/09/2018								Officer (give title Other (specify below) below)				
(Street) INDIANAPOLIS IN 46222					- 4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Che Line) X Form filed by One Reporting Form filed by More than One Person										e Reporting Per	son	
(City)	(St		(Zip) e I - N	on-Deriv	/ative	Sec	uritie	s Ac	auirea	d. Di	sposed o	f. or E	Benefi	cially	Own	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					tion	on 2A. Deemed Execution Date,			3. Transacti Code (Ins		4. Securities Acquired (A Disposed Of (D) (Instr. 3,				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	Amount	(A) o	r Price	e	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Stock			05/09/2	2018				S		27,400 ⁽¹⁾	D	\$42	2.0617	6	04,100	I	By Areljay II LLC ⁽²⁾
Common Stock 05/09/					2018)18			S		72,891 ⁽¹⁾	D	\$42	\$42.0617		048,186	I	By The Crown Fund ⁽²⁾
Common Stock 05/09/20					2018	18			S		33,600(1)	D	\$42	\$42.0617		93,361	I	By The Crown Fund II ⁽²⁾
Common Stock 05/09/20					2018	18			S		12,292(1)	D	D \$42.0617		22,192		D	
Common Stock 05/09/20					2018	18			S		900(1)	D \$42.0		2.0617	7 19,000		I	By HCNI II, LLC ⁽²⁾
		Ta	able II								osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transa Code (8)				6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Numbe of Shares					

Explanation of Responses:

- $1.\ These\ shares\ were\ sold\ in\ compliance\ with\ a\ Rule\ 10b5-1\ sales\ plan\ entered\ into\ on\ February\ 17,\ 2018.$
- 2. These shares are held by the identified entities in which trusts established for the benefit of the reporting person's wife and children indirectly own interests. The reporting person is President and Chief Executive Officer of Longview Asset Management, LLC, which, by virtue of managing the investments of such entities, may be deemed to beneficially own the shares held by such entities. The reporting person disclaims beneficial ownership of the shares held by these entities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all the reported shares for purposes of Section 16 or for any other purpose.

/s/Angie Newhouse, Attorney

05/11/2018

** 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.