FORM 4

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

Vashington,	D.C. 20549
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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).

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*  Scroggins Eric C.  (Last) (First) (Middle)  C/O ALLISON TRANSMISSION HOLDINGS, INC.  ONE ALLISON WAY  (Street)  INDIANAPOLIS IN 46222  (City) (State) (Zip)						2. Issuer Name and Ticker or Trading Symbol <u>Allison Transmission Holdings Inc</u> [ ALSN ]      3. Date of Earliest Transaction (Month/Day/Year)     02/23/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Director Difficer (give title Other (specify below) VP, Gen. Counsel & Secretary  6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ay/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		,   Ţ	3. Transacti Code (Ins		4. Securi Disposed 5)				Benefic	ies cially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							c	Code	V	Amount	(A) (D)	or	Price	Transa (Instr. 3	tion(s)			(111501.4)			
Common	02/23	23/2023					М		1,060	) /	1	(1)	5	5,305		D					
Common Stock 02/2						/2023				М		21	1	1	(2)	5	5,326		D		
Common Stock 02/23					/2023					F		320(3	) I	)	\$47.5	7 5	5,006		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. Deem Execution if any (Month/Da	ed Date,	4. Transa	ransaction ode (Instr.		5. Number of		6. Date Exercis Expiration Date (Month/Day/Yea		ble and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	e rcisable		xpiration ate	Title	OI Ni Of	umber						
Restricted Stock Units	(1)	02/23/2023			М			1,060		(1)		(1)	Commo Stock	n 1	,060	\$0	2,121		D		
Dividend Equivalent Rights	(2)	02/23/2023			М			21		(2)		(2)	Commo	n	21	\$0	212		D		

## **Explanation of Responses:**

- 1. Settlement of restricted stock units ("RSUs") granted on February 23, 2022. Each RSU represents a contingent right to receive one share of Allison Transmission Holdings, Inc. ("ALSN") common stock.
- 2. Settlement of dividend equivalent rights ("DERs"). The DERs accrued when and as dividends were paid on ALSN common stock and vest proportionately with the RSU to which they relate. Each DER is the economic equivalent of one share of ALSN common stock.
- 3. Represents shares withheld by ALSN to satisfy tax withholding obligations on the vesting of DERs and RSUs.

/s/ Eric C. Scroggins

02/27/2023

\*\* Signature of Reporting Person

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.