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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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* <u>Headly Michael G.</u> | | | | | | | 2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN] | | | | | | | | (Check all applic Directo | | r 10% Owner | | ner |
|--|---|--|---|---|------------------------------|--|--|------------------------|--|--------|--|---|---|-------------------------|---|--|-------------|--|---|
| (Last) ONE AL | (F | irst) | | 3. Date of Earliest Transaction (Month/Day/Year) 12/17/2014 | | | | | | | | X | X Officer (give title Other (specibelow) SVP, Global MSS | | | | респу | | |
| (Street) INDIANAPOLIS IN 46222 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | vidual or Joint/Group Filing (Check Applicable 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. Transaction Date (Month/Day/Ye | | | | | | if any | ution | ed Date, y/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | 5) | Securition Beneficion Owned I | ecurities eneficially wned Following | | n: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reporte Transac (Instr. 3 | | tion(s) | | | (Instr. 4) | |
| Common Stock 12/17/201 | | | | | | | 4 | | M | | 20,000 | Α | \$12. | 66 | 59 | 59,740 | | D | |
| Common Stock 12/17/201 | | | | | | 14 | | | S ⁽¹⁾ | | 20,000 | D | \$33.18 | 3.1869 ⁽²⁾ 3 | | 39,740 | | D | |
| | | 7 | Table | | | | | | | | posed of, , converti | | | | wned | | | | |
| 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) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | De | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerci | isable | Expiration Date | Title | Amou or Numb of Share | er | | | | | |
| Employee Stock Option (right to | \$12.66 | 12/17/2014 | | | M | | | 20,000 | (3 | 3) | 09/30/2017 | Common Stock | ⁿ 20,00 | 00 | \$0 | 91,889 |) | 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 \$33.0100 to \$33.3600. 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. Option vested in five equal installments beginning August 7, 2008.

Remarks:

Scroggins, attorneyin-fact

12/18/2014

** 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.