| SEC For | m 4 | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|-------|---|--|-----|---------|--|--|------------------|---|------------------------------------|-------|---|--|----------|---|---|--|
| | FORM | 4 | UNITED STATES SECURITIES AND EXCHANGE COMMIS Washington, D.C. 20549 | | | | | | | | | | | | | | SION | | | |
| Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filec Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for | | | | | | Pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | Estimated average burden | | | | 3235-0287 en 0.5 | |
| securiti intende defense | chase or sale c es of the issue d to satisfy the e conditions of struction 10. | r that is | | | | | | | | | | | | | | | | | | |
| 1. Name and Address of Reporting Person [*] Bohley <u>G Frederick</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Allison Transmission Holdings Inc</u> [ALSN] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | |
| (Last) (First) (Middle) C/O ALLISON TRANSMISSION HOLDING, INC. ONE ALLISON WAY | | | | | | Date of 27/20 | | st Trar | nsaction (Mor | nth/[| Day/Year) | | below) below) cOO, CFO & Treasurer | | | | | | | |
| (Street) INDIANAPOLIS IN 46222 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S1 | | tive Securities Acquired, Disposed of, or Benefic | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | action | ction 2A. Deen Executio | | | a, 3. Transact Code (Ins | 3. 4. Transaction Di Code (Instr. 5) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | 5. Amou Securitie Benefici Owned F | nt of 6. (es Fo ally (D) Following (I) | | vnership n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code \ | v | Amount | (A) (D) | or | Price | Reported Transact (Instr. 3 | ction(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. Deemo Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4) | s Ily | 10. Ownershij Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | or Nu of | mber | | | | | | |
| Dividend Equivalent Rights | (1) | 11/27/2024 | | | Α | A | | | (1) | (1) (1 | | Common Stock | | 35 | \$ 0 | 403 | | D | | |
| Explanatio | n of Respons | ies: | | | | | | | | | | | | | | | | | | |

1. The dividend equivalent rights accrued on previously awarded restricted stock units ("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.

/s/ Preston B. Ray, attorney-infact 12/02/2024

** 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.