FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| washington, D.C. 20549 | OMB APPROVAL | | |
|--|--------------|-------|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235- | |

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| 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* Parish David L. | | | | | 2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | |
|--|--|--|---------------------------------|---|---|-----|--|----------------------|--|-----------------|---|---|---|--|--|
| (Last) (First) (Middle) ONE ALLISON WAY | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/29/2015 | | | | | | | X Officer (give title below) Other below Sr. VP, Ops and Purchasir | | | | |
| (Street) INDIANAPOLIS IN 46222 (City) (State) (Zip) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) 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) | | | | | Execution Date, | | Code (Ins | ion Dispo str. 5) | | | d Securities Fo Beneficially (D) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
| Derivative Conversion Security Or Exercise (Month/Day/Year) Executi | | 3A. Deemed Execution Dat if any (Month/Day/Ye | Date, Transaction Code (Inst | | on of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 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) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Cod | de V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Dividend Equivalent Rights | (1) | 05/29/2015 | | A | | 30 | | (1) | (1) | Common Stock | 30 | \$0 | 246 | D | |

Explanation of Responses:

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.

Remarks:

/s/ Eric C. Scroggins, attorney-06/02/2015 in-fact

** 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.