FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

BENEFICIAL OWNERSHIP

heck this box if no longer subject to ection 16. Form 4 or Form 5	STATEMENT OF CHANGES IN
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the

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* Scroggins Eric C. (Last) (First) (Middle) ONE ALLISON WAY					Susuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN] Date of Earliest Transaction (Month/Day/Year) 02/07/2018										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) VP, General Counsel & Sec				
(Street) INDIANAPOLIS IN 46222 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benefice									S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				iction	2. E) if	2A. Deemed Execution Date, if any (Month/Day/Year)		, 3. Tran	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amou Securitie Benefici Owned I	nt of es ally Following	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Cod	v	Amount	Amount (A) or (D)		Price		eported ansaction(s) nstr. 3 and 4)			(Instr. 4)
Common Stock 02/07/					/2018	2018			A		1,846	5(1)	A	\$0	17	7,826		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. Deeme Execution if any (Month/Da	Date, T	l. Fransaction Code (Instr. 3)				6. Date Expirati (Month/	on Dat		Amount of			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V	v (A)		(D)	Date Exercis		Expiration Date	N of		Amount or Number of Shares					
Employee Stock Option (right to buy)	\$43.3	02/07/2018			A		5,787		(2)		02/07/2028	Com Sto		5,787	\$0	5,787	,	D	
Restricted Stock	(3)	02/07/2018			A		1,929		(4)		(4)	Com		1,929	\$0	1,929		D	

Explanation of Responses:

- 1. On February 19, 2015, the reporting person was granted performance-based restricted stock, with the number of restricted shares earned to be determined based on the extent to which certain performance conditions were met for a performance period of 2015-2017. As determined on February 7, 2018, based on the Company's actual performance for 2015-2017, the reporting person earned 1,846 restricted shares. Earned restricted shares will vest on February 19, 2018.
- 2. The option vests on February 7, 2021.
- 3. Each restricted stock unit ("RSU") represents a contingent right to receive one share of Allison Transmission Holdings, Inc. common stock
- 4. The RSUs vest on February 7, 2021.

Remarks:

Units

/s/ Eric C. Scroggins 02/09/2018 ** 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.