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FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| l | OMB APPROVAL | | | | | | | | | | |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|--|
| | OMB Number: 3235-0287 | | | | | | | | | | |
| | Estimated average burden | | | | | | | | | | |
| I | hours per response: | 0.5 | | | | | | | | | |

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|---|
| Filed surgest to Castion 40(a) of the Casuitian Euclidean Act of 4024 |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | of Section So(ii) of the investment Company Act of 1940 | | | | | |
|---|---|--|--|--|--|--|
| 1. Name and Address of Reporting Person* | 2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| <u>Graziosi David S.</u> | <u></u> | X Director 10% Owner | | | | |
| (Last) (First) (Middle) C/O ALLISON TRANSMISSION HOLDINGS, | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2024 | X Officer (give title Other (specify below) below) Chair, President and CEO | | | | |
| INC. ONE ALLISON WAY | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| (Street) INDIANAPOLIS IN 46222 | | Form filed by More than One Reporting Person | | | | |
| | Rule 10b5-1(c) Transaction Indication | | | | | |
| (City) (State) (Zip) | Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst | a contract, instruction or written plan that is intended to struction 10. | | | | |
| Table I - Non-Deriva | ative Securities Acquired. Disposed of. or Benefi | cially Owned | | | | |

| 1 | . Title of Security (Instr. 3) | (Month/Day/Year) if any | | xecution Date, Transaction | | | | | Securities | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|--------------------------------|-------------------------|--|----------------------------|---|--------|---------------|-------|------------------------------------|---|---|
| | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |

| | 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. 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) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Dividend Equivalent Rights | (1) | 03/15/2024 | | Α | | 245 | | (1) | (1) | Common Stock | 245 | \$0 | 1,336 | 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.

| /s/ Preston B. Ray, attorney-in- | 02/10/2024 |
|----------------------------------|------------|
| fact | 03/19/2024 |

** 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.