FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20049

OMB APPROVAL									
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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(b) of the Investment Company Act of 1940

					01 ,	Jectioi	1 30(11)	or tite	IIIVCSIII	iciii C	ompany Act	01 1340							
1. Name and Address of Reporting Person* STAR JAMES A						2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN]								(Checl	k all app	olicable)	g Person(s) to I		
														X	Direc	ctor	10% (Owner	
(Last) (First) (Middle) C/O ALLISON TRANSMISSION HOLDINGS INC						3. Date of Earliest Transaction (Month/Day/Year) 04/13/2018									Offic below	er (give title w)	Other below	(specify)	
ONE ALLISON WAY					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)				
(Ctroat)					-										Form filed by One Reporting Person				
(Street) INDIANAPOLIS IN 46222														X		n filed by Mor	e than One Rep		
(City)	(St	ate) (Zip)																
		Tabl	e I - N	on-Deriv	/ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefi	cially	Owne	ed			
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					Benefic Owned		ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) o	r Pric	e	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock			04/13/2018		3		S		3,600(1)	D	\$40	\$40.1698		90,900	I	By Areljay II LLC ⁽²⁾			
Common Stock			04/13/2018		8		S		21,868 ⁽¹⁾	D	\$40	\$40.1698 2		321,395	I	By The Crown Fund ⁽²⁾			
Common Stock			04/13/2018				S		4,700(1)	D	\$40	\$40.1698		127,561	I	By The Crown Fund II ⁽²⁾			
Common Stock														1	9,900	I	By HCNI II, LLC ⁽²⁾		
Common Stock																1,900	D		
		Ta	ble II								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	n Date Exec e (Month/Day/Year) if any (Mon	if any		4. Transa Code (ransaction Code (Instr.		5. Number of			cisable and ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. P Deri Sec (Ins	ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)		Date Exercisab		Expiration Date	Title	Number of Shares						

Explanation of Responses:

- $1.\ These \ shares \ were \ sold \ in \ compliance \ with \ a \ Rule \ 10b5-1 \ sales \ plan \ entered \ into \ on \ February \ 17, \ 2018.$
- 2. These shares are held by the identified entities in which trusts established for the benefit of the reporting person's wife and children indirectly own interests. The reporting person is President and Chief Executive Officer of Longview Asset Management, LLC, which, by virtue of managing the investments of such entities, may be deemed to beneficially own the shares held by such entities. The reporting person disclaims beneficial ownership of the shares held by these entities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all the reported shares for purposes of Section 16 or for any other purpose.

/s/Angie Newhouse, Attorney

04/13/2018

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.