FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-02										
Estimated average burden										
hours per response	: 0.5									

IIIStruc	uon I(b).			File		to Section Tel							54		1				
					or Sect	ion 30(h) of the	e Investi	ment	Com	pany Act	of 19	40							
1. Name and Address of Reporting Person*  GARCIA TUNON ALVARO				2. Issuer Name <b>and</b> Ticker or Trading Symbol Allison Transmission Holdings Inc [ ALSN ]								]  (Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>G/MC/// TOTOTY / ILLY// MO</u>														X Directo			10% O		
(Last) (First) (Middle) ONE ALLISON WAY					3. Date of Earliest Transaction (Month/Day/Year) 05/05/2021									Officer below)	r (give title )		Other (specify below)		
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) INDIANAPOLIS IN 46222				_							Line	X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																
		Tab	le I - Non	-Deriv	ative Se	curities Ac	cquire	d, E	Disp	osed c	of, o	r Ben	eficial	ly Owne	d				
Date				Day/Year)	2A. Deemed Execution Date if any (Month/Day/Ye	e, Transaction Di Code (Instr. 5)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				Securition Benefici Owned I	curities neficially ned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Со	de	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
		Т				urities Acq s, warrants								Owned					
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transactior Code (Instr. 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)  8. Price of Derivative Securities Securities Owned Following Reported Transactic (Instr. 4)		s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		

(2)

1. These deferred stock units ("DSUs") represent a quarterly payment of the portion of the reporting person's annual retainer and other fees under the Allison Transmission Holdings, Inc. (the "Company") Fifth Amended and Restated Non-Employee Director Compensation Policy ("Policy") deferred pursuant to the Company's Amended and Restated Non-Employee Director Deferred Compensation Plan. The annual retainer and other fees are payable quarterly in arrears.

Date

Exercisable

(2)

(5)

(D)

Expiration

(2)

(5)

Title

Commor

Stock

Common

and 5)

(A)

646

2,927

- 2. Each DSU is the economic equivalent of one share of the Company's common stock. The DSUs become payable, in common stock, or at the Company's election cash, at the earlier of the reporting person's separation from service or a change in control. DSUs earn dividend equivalents when dividends are declared on the Company's common stock.
- 3. The number of DSUs received was calculated based on \$42.57, which was the closing price of the Company's common stock on the date of grant.

Code

A

Α

- 4. The DSUs represent the portion of the reporting person's annual equity award under the Policy deferred pursuant to the Company's Amended and Restated Non-Employee Director Deferred Compensation
- 5. The DSUs vest on the date of the next annual meeting of the stockholders of the Company.

05/05/2021

05/06/2021

6. The number of DSUs received was calculated based on \$44.40, which was the closing price of the Company's common stock on the date of grant.

## Remarks:

Deferred

Units<sup>(1)</sup> Deferred

Stock

Units(4)

/s/Jacalyn C. Bolles, attorney-

Amount

Shares

646

2.927

\$0<sup>(3)</sup>

\$0<sup>(6)</sup>

05/07/2020

30,751

33,678

D

D

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.