SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

I OMB APPROVAL

	OMB Number:	3235-0287							
Estimated average burden									
	hours per response:	0.5							

	STATEMENT	OF	CHANGES	IN BENEFICIAL	OWNERSHIP
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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).		d pursı	iant to	Secti	on 16(a)) of the S	ecurit	NEFICI	ge Act of 1		SHIP	Estim		er: verage burder sponse:	3235-0287 n 0.5
1. Name and Address of Reporting Person* <u>Pittard Dana JH</u>	or Section 30(h) of the Investment Company Act of 1940 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							
				3. Date of Earliest Transaction (Month/Day/Year) 02/28/2024							X Officer (give title Other (specify below) below) VP, Defense Programs				
INC. ONE ALLISON WAY	4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	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								ting				
(City) (State) (Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								l to					
Table I - No	on-Deriv	ative	Seci	uritie	es Aco	quired	, Dis	posed o	f, or Bei	neficial	y Owned				
1. Title of Security (Instr. 3) Date (Month/Da			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) (Disposed Of (D) (Instr. 3, 4					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	Transacti (Instr. 3 a	ion(s)			(1130. 4)
Common Stock 02/28/2						М		3,739	A	(1)	7,3	399		D	
Common Stock 02/28/2						F		1,661 ⁽²	⁽⁾ D	\$75.5	9 5,7	738		D	
Common Stock											14,	887		I	Pittard Living Trust
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. 3. Transaction Or Exercise Price of Derivative Security (Month/Day/Year)		4. 5. Number Transaction Code (Instr. 8) Code (Instr. 8) Code (Instr. 9) Code (Instr. 10) Code (In		ivative urities uired or oosed D) tr. 3, 4	Expiration Date Ai (Month/Day/Year) Si Uu Di (In		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative d Security S (Instr. 5) E F F T	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	rative prities oficially ed owing orted saction(s)	Ownership Form: E Direct (D) 0	Beneficial Ownership (Instr. 4)		
		Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Performance (1) 02/28/2024		М			3,739	(1)		(1)	Common Stock	3,739	\$ <u>0</u>	0		D	

Explanation of Responses:

1. Settlement of performance-based restricted stock units ("PSUs") granted on February 10, 2021. Each PSU represents a contingent right to receive one share of Allison Transmission Holdings, Inc. ("ALSN") common stock.

2. Represents shares withheld by ALSN to satisfy tax withholding obligations on the vesting of PSUs.

/s/ Preston B. Ray, attorney-in-03/01/2024 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.