FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHII | | | | |
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Dean Sharon L. | | | | | 2. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN] | | | | | | | | | Check a | all app Direct | licable) tor | ig Person | p Person(s) to Issuer 10% Owner | | |
|--|---|---|----------------------------------|-----------------------------|--|---|--|--|------------------|--|---|-------------|---------------------------|--|-----------------------|--|---|---------------------------------------|--|--|
| (Last) ONE AL | (Fii LISON WA | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/10/2016 | | | | | | | | | | Officer (give title below) VP, Quality | | Other (specify below) and Reliability | | |
| (Street) INDIANAPOLIS IN 46222 (City) (State) (Zip) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| Dat | | | Date | Date (Month/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | 1 and Secu Bene Own | | cially I Following | 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 | Repor Transa (Instr. | | ction(s) 3 and 4) | | | (111501. 4) | |
| Common Stock | | | 08/10 | 08/10/2016 | | | | S | | 5,500 | | D | \$28 | 28.15 | | 7,906 | 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) | Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any | | Date, Transaction Code (Instr | | | on of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Pric Deriva Securi (Instr. | ative ity 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | | | Date Exercisa | | Expiration e Date | | or Nui of | ount mber ares | | | | | | |

Explanation of Responses:

Remarks:

/s/ Eric C. Scroggins, attorney-08/12/2016 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.