

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Carlyle Group Management L.L.C.</u> (Last) (First) (Middle) <u>C/O THE CARLYLE GROUP</u> <u>1001 PENNSYLVANIA AVE. NW, SUITE 220S</u> (Street) <u>WASHINGTON DC 20004</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Allison Transmission Holdings Inc [ALSN]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>06/09/2014</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	06/09/2014		S		17,500,000	D	\$29.95	5,321,250	I	See Footnote ⁽¹⁾

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. Transaction 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)	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	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person*
Carlyle Group Management L.L.C.
 (Last) (First) (Middle)
C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S
 (Street)
WASHINGTON DC 20004
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Carlyle Group L.P.
 (Last) (First) (Middle)
C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S
 (Street)
WASHINGTON DC 20004
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Carlyle Holdings I GP Inc.
 (Last) (First) (Middle)

C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S

(Street)

WASHINGTON DC 20004

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[Carlyle Holdings I GP Sub L.L.C.](#)

(Last)

(First)

(Middle)

C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S

(Street)

WASHINGTON DC 20004

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[Carlyle Holdings I L.P.](#)

(Last)

(First)

(Middle)

C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S

(Street)

WASHINGTON DC 20004

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[TC Group, LLC](#)

(Last)

(First)

(Middle)

C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S

(Street)

WASHINGTON DC 20004

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[TC Group IV Managing GP, L.L.C.](#)

(Last)

(First)

(Middle)

C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S

(Street)

WASHINGTON DC 20004

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[Carlyle Partners IV AT Holdings, L.P.](#)

(Last)

(First)

(Middle)

C/O THE CARLYLE GROUP
1001 PENNSYLVANIA AVE. NW, SUITE 220S

(Street)

WASHINGTON DC 20004

(City)

(State)

(Zip)

Explanation of Responses:

1. Carlyle Partners IV AT Holdings, L.P. is the record holder of these shares. Carlyle Group Management L.L.C. is the general partner of The Carlyle Group L.P., which is a publicly traded entity listed on NASDAQ. The Carlyle Group L.P. is the sole shareholder of Carlyle Holdings I GP Inc., which is the managing member of Carlyle Holdings I GP Sub L.L.C., which is the general partner of Carlyle Holdings I

Remarks:

CARLYLE GROUP
MANAGEMENT L.L.C., By: /s/ Jeremy W. Anderson, attorney-in-fact 06/11/2014

THE CARLYLE GROUP L.P.,
By: Carlyle Group
Management L.L.C., its general partner, By: /s/ Jeremy W. Anderson, attorney-in-fact 06/11/2014

CARLYLE HOLDINGS I GP
INC., By: /s/ Jeremy W. Anderson, attorney-in-fact 06/11/2014

CARLYLE HOLDINGS I GP
SUB L.L.C., By: Carlyle
Holdings I GP Inc., its
managing member, By: /s/
Jeremy W. Anderson, attorney-
in-fact 06/11/2014

CARLYLE HOLDINGS I L.P.,
By: Carlyle Holdings I GP Sub
L.L.C., its general partner, By:
Carlyle Holdings I GP Inc., its
managing member, By: /s/
Jeremy W. Anderson, attorney-
in-fact 06/11/2014

TC GROUP, L.L.C., By:
Carlyle Holdings I L.P., its
managing member By: /s/
Jeremy W. Anderson, attorney-
in-fact 06/11/2014

TC GROUP IV MANAGING
GP, L.L.C., By: TC Group,
L.L.C., its managing member,
By: Carlyle Holdings I L.P., its
managing member, By: /s/
Jeremy W. Anderson, attorney-
in-fact 06/11/2014

CARLYLE PARTNERS IV AT
HOLDINGS, L.P., By: TC
Group IV Managing GP,
L.L.C., its general partner, By:
TC Group, L.L.C., its
managing member, By: Carlyle
Holdings I L.P., its managing
member, By: /s/ Jeremy W.
Anderson, attorney-in-fact 06/11/2014

** 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.