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| Price Rober Form 4 February 28 | | | | | | | | | | | | |
|--|---|--|---|--|---|------------|------|--|--|--|---|--|
| | | | | | | | | | PROVAL | | | |
| | UNITED | Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | |
| Check t if no loi | ngor | | | | | | | | | Expires: | January 31, 2005 | |
| subject Section Form 4 | to STATE 16. | MENT OF | NGES IN BENEFICIAL OWN SECURITIES | | | | | ERSHIP OF | Estimated a burden hour response | average | | |
| Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | | |
| Price Robert M. Symbol Allison | | | 8 | | | | I | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | Allison Transmission Holdings Inc [ALSN] | | | | | s Inc | (Check all applicable) | | | |
| (Month | | | (Month/ | ate of Earliest Transaction nth/Day/Year) | | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) | | | |
| ONE ALL | ISON WAY | | 02/26/2 | /2013 | | | | | VP, Human Resources | | | |
| | | | | (Month/Day/Year) | | | | А | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| INDIANAPOLIS, IN 46222 — Form filed by More than One Reporting Person | | | | | | | | | | | | |
| (City) | (State) | (Zip) | Tab | ole I - Noi | n-E | Derivative | Secu | rities Acqui | red, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | nsaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year) | | | 3. 4. Securities Acquired (A) Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | | 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 Indirect Beneficial Ownership (Instr. 4) | |
| Common | | | | Code V | V | Amount | (D) | Price | (IIIsu: 5 and 4) | | | |
| Common Stock | 02/26/2013 | | | М | | 38,202 | А | \$ 12.66 | 64,642 | D | | |
| Common Stock | 02/26/2013 | | | S | | 38,202 | D | \$ 22.2669 (1) | 26,440 | D | | |
| Common Stock | 02/27/2013 | | | М | | 7,560 | А | \$ 12.66 | 34,000 | D | | |
| Common Stock | 02/27/2013 | | | S | | 10,300 | D | \$ 22.4192 (2) | 23,700 | D | | |

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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) | A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|--|---------------------------------------|--|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option (right to buy) | \$ 12.66 | 02/26/2013 | | М | 38,202 | (3) | 09/30/2017 | Common Stock | 38,202 |
| Employee Stock Option (right to buy) | \$ 12.66 | 02/27/2013 | | М | 7,560 | <u>(3)</u> | 09/30/2017 | Common Stock | 7,560 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------------------|-------|--|--|--|--|
| 1.0.0 | Director | 10% Owner | Officer | Other | | | | |
| Price Robert M. ONE ALLISON WAY INDIANAPOLIS, IN 46222 | | | VP, Human Resources | | | | | |
| Signatures | | | | | | | | |
| /s/ Fric C Scroggins | | | | | | | | |

/s/ Eric C. Scroggins, attorney-in-fact 02/28/2013

**Signature of Reporting Person

Date

Explanation of Responses:

* 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).

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The price reported is a weighted average price. These shares were sold in multiple transactions at per share prices ranging from \$22.0500
 (1) to \$22.5600. The reporting person undertakes to provide the Company, any security holder of the Company or the staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

The price reported is a weighted average price. These shares were sold in multiple transactions at per share prices ranging from \$22.1700
 (2) to \$22.7600. The reporting person undertakes to provide the Company, any security holder of the Company or the staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote

(3) The option vested in five equal annual installments beginning on August 7, 2008.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.