INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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)

1. Name and A Person <u>*</u> Bernasek		oorting	2. Date of Event Requiring Statement (Month/Day/Year)	Allison Tra	3. Issuer Name and Ticker or Trading Symbol Allison Transmission Holdings Inc [ALSN]					
(Last)	(First)	(Middle)	03/14/2012	4. Relationsh Person(s) to l	ip of Reporting ssuer		endment, Date Original nth/Day/Year)			
ONE ALLISON WAY				(Check	(Check all applicable)					
INDIANAP	(Street) OLIS, IN	46222		X Directo Officer (give title belo	r 10% Ov Other	vner Filing(Ch _X_Form) Person	dual or Joint/Group teck Applicable Line) filed by One Reporting filed by More than One Person			
(City)	(State)	(Zip)	Tal	ble I - Non-Derivat	tive Securities	Beneficiall	Beneficially Owned			
1.Title of Secu (Instr. 4)	rity		Ben	Amount of Securities aeficially Owned tr. 4)	Ownership (. Nature of Ind Ownership Instr. 5)	irect Beneficial			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)										
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Der (Instr. 4)	ivative Securit	Expi	ate Exercisable and ration Date /Day/Year)	3. Title and Amount o Securities Underlying Derivative Security (Instr. 4)	f 4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)			

Title

Expiration

Date

Date

Exercisable

Price of Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Bernasek Brian A ONE ALLISON WAY INDIANAPOLIS, IN 46222	ÂX	Â	Â	Â		
Signatures						
/s/ Eric C. Scroggins, attorney-in-fact	03/14/2012					
**Signature of Reporting Person		Date				

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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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Remarks:

Exhibit List: Exhibit 24 - Confirming Statement

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.