### Edgar Filing: RABAUT THOMAS W - Form 4

RABAUT TH	IOMAS W									
Form 4										
November 14	, 2018									
FORM	4 UNITED S	<b>4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							PPROVAL 3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation: may contin <i>See</i> Instruct 1(b).	Filed purs Section 17(a	STATEMENT OF CHANGES IN 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 20(b) of the Investment Company Act of 1940								
(Print or Type R	esponses)									
1. Name and Ad RABAUT TI	ldress of Reporting P HOMAS W	Symbol	er Name <b>and</b> n Transmis N]				5. Relationship o Issuer (Cheo	f Reporting Per ck all applicable		
(Last)			of Earliest Tr Day/Year) 2018	ansaction			_X_ Director Officer (give below)		6 Owner er (specify	
			nendment, Date Original onth/Day/Year)				<ol> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ol>			
INDIANAPO	DLIS, IN 46222							More than One Ro		
(City)	(State) (2	Zip) Tal	ole I - Non-D	erivative s	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	d (A) of d of (D 4 and (A) or	)) 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 Indirect Beneficial Ownership (Instr. 4)	
Common Stock (1)	11/12/2018		A	406	(D) A	Price \$ 0 (2)	40,040	D		

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 3. Transaction Date 3A. Deemed 6. Date Exercisable and 7. Title and 8. Price of 2. 4. 5. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of Derivative Security or Exercise any Code of (Month/Day/Year) Underlying Security Price of (Month/Day/Year) (Instr. 8) (Instr. 5) (Instr. 3) Derivative Securities (Instr. 3 and 4) Derivative Securities Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Othe		
RABAUT THOMAS W ONE ALLISON WAY INDIANAPOLIS, IN 46222	Х					
Signatures						
/s/ Jacalyn C. Bolles, attorney-in-fact	11/14/2018					

<u>\*\*</u>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).

These shares represent a quarterly payment of the reporting person's annual retainer under the Allison Transmission Holdings, Inc. (the (1) "Company") Third Amended and Restated Non-Employee Director Compensation Policy ("Policy"). The annual retainer is paid quarterly in arrears in cash or common stock at the reporting person's discretion.

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(2) The number of shares of common stock received was calculated based on \$46.16, which was the closing price of the Company's common stock on the date of grant.

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.

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