| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Ch | leck this box if no longer subject to |
|-----|---------------------------------------|
| | ction 16. Form 4 or Form 5 |
| ob | ligations may continue. See |
| Ins | struction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OWR APPR | OVAL |
|-----------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average but | rden |
| hours ner resnonse. | 0.5 |

| 1. Name and Address of Reporting Person [*] Borowski Michael D | | | 2. Issuer Name and Ticker or Trading Symbol <u>TransDigm Group INC</u> [TDG] | | tionship of Reporting Pe all applicable) Director | rson(s) to Issuer 10% Owner |
|--|---------|-------|--|------------------------|--|--------------------------------|
| I (Last) (Eirst) (Middle) I | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/07/2014 | x | Officer (give title below) Controll | Other (specify below) er |
| (Street) CLEVELAND OH 44114 | | 44114 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | ng (Check Applicable porting Person an One Reporting | |
| (City) | (State) | (Zip) | | | Person | |

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. Transa Code (8) | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--|---|------------------------------|---|--------|---------------|---|---|---|----------|
| | | | | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 08/07/2014 | | М | | 3,000 | A | \$80.8 | 3,000 | D | |
| Common Stock | 08/07/2014 | | S | | 3,000 | D | \$ 173.4555 ⁽¹⁾ | 0 | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deri Sec Acq (A) o Disp of (I (Inst | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Date Amount of | | 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 | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option | \$80.8 | 08/07/2014 | | М | | | 3,000 | 09/30/2011 | 04/27/2021 | Common Stock | 3,000 | \$0.00 | 8,875 | D | |

Explanation of Responses:

1. Price reported constitutes the average weighted price of shares sold. Shares were sold at varying prices in the range of \$173.30 - \$173.54. The reporting person hereby undertakes, upon request of the Commission, the issuer or a security holder of the issuer, to provide full information regarding the number of shares sold at each separate price.

Remarks:

Halle Fine Terrion as attorney

08/07/2014

** Signature of Reporting Person

in fact for Michael Borowski 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.