FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES II	N BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 -	A - -	B*			2 1	ssuer N	Jame	and T	icker or	Tradir	na Symbol			5 Rela	tionshin	of Reportin	n Pers	on(s) to Iss	suer		
1. Name and Address of Reporting Person* Henderson Robert S					2. Issuer Name and Ticker or Trading Symbol TransDigm Group INC [TDG]									all application	cable)	10% Owi		wner			
(Last) TRANSI	(Fi	,	(Middle	2)		3. Date of Earliest Transaction (Month/Day/Year) 08/15/2014									below)		below)		ъреспу 		
35 NORTH LAKE AVENUE SUITE 920																					
(Street) PASADENA CA 91101				_ 4. I _	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person Person								
(City)	(S	tate)	(Zip)																		
		Tab	le I -	Non-Deri	vative	e Sec	uriti	ies A	cquir	ed, D	isposed (of, or I	Benefi	cially	Owned	t					
Da			2. Transacti Date (Month/Day)	th/Day/Year) if any		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			Benefi Owned		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)			
Common Stock 08/15/2			08/15/20	014	4			M		2,500	A	\$2	6.5	11,000			D				
Common Stock 08/15/201)14	4		S		1,307	D	\$177.	77.7976(1)		9,693		D						
Common	Common Stock 08/15/202)14	s 1,193 D \$		\$177.4	4352 ⁽²⁾	52 ⁽²⁾ 8,500		D										
		7	able								sposed of s, converti				wned		,	,			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	if any			Transaction Code (Instr.		of Ex		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (Ir	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly OF	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Cc	Code	v	(A) (D)		Date Exercisable		Expiration Date	Title	Amo or Num of Sha	ber							
Stock	\$25.6	08/15/2014			М		2,500 09/30/200		0/2007	12/01/2016	16 Common 2.5		00	\$0.00	10,000		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 \$177.22 \$178.17. 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.
- 2. Price reported constitutes the average weighted price of shares sold. Shares were sold at varying prices in the range of \$178.23 \$178.59. 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:

Option

All transactions reported herein made pursuant to an established 10b5-1 plan.

Halle Fine Terrion as attorney in fact for Robert Henderson

Stock

08/18/2014

** Signature of Reporting Person

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.