

Towards a typology of pseudo antipassives: An Austronesian perspective

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Although the Austronesian family is widely regarded as a hotspot for antipassive constructions, a closer investigation of 53 languages from Taiwan and Maritime Southeast Asia challenges this view. Philippine-type Austronesian languages have often been analysed as exhibiting an alternation between a basic transitive construction and a corresponding antipassive. Yet when established typological criteria are applied consistently to the constructions commonly referred to as Actor Voice, genuine antipassives prove to be rare in western Austronesian. We further demonstrate how these putative antipassives form a continuum of semi-transitives, characterized by a general decrease in semantic transitivity while often still featuring a patient that retains various traits of a core argument. Not only does this cline enhance our understanding of how antipassive-like constructions may develop over time, but it also suggests that syntactic intransitivity is not necessarily the endpoint of discourse-driven changes that reduce clausal transitivity. Moreover, it undermines the prevalent ergative view of western Austronesian languages and lends new support to accusative and symmetrical voice analyses, both maintaining that Austronesian-style voice does not alter clausal transitivity. The Austronesian pseudo antipassives thus underscore the importance of approaching typological classifications with caution and situating language-specific analyses within the broader typological literature.

Keywords: ◦ Antipassive ◦ western Austronesian languages ◦ valency-decreasing operation ◦ Philippine-type languages ◦ Indonesian-type languages ◦ Actor Voice ◦ Austronesian-type voice

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1 Introduction

Since Dixon (1977), antipassives—commonly defined as intransitive constructions in which the patient of a semantically transitive verb is demoted—have been widely viewed as a hallmark of ergative-absolutive alignment. Although this association has been questioned by large-scale typological surveys (Heaton 2017), it remains central to analyses of Actor Voice (AV), a controversial construction often considered a defining feature of western Austronesian languages. An example is given in (1).

(1) Tagalog

h<um>abol si aya kay lia.
chase<AV> PN.PIVOT A. PN.CM₁ L.

‘Aya chased Lia.’ (Actor Voice; alleged antipassive)

In (1), the agent of the two-place verb ‘chase’ bears the argument marker *si*, which flags the syntactically prominent phrase in a clause. We label this marker and its equivalents as *pivot* throughout the paper. The patient phrase carries a distinct marker labeled as PN.CM₁ (personal name, case marker 1) and cannot undergo relativization. The verb includes an obligatory infix <um>, which is standardly labeled as the Actor Voice affix and also appears in monovalent intransitives, as in (2)¹

(2) *d<um>ating si aya.*
<AV>arrive PN.PIVOT A.

‘Aya arrived.’ (Actor Voice; monovalent)

Because the same verbal marking (e.g., <um> in Tagalog) appears in both the two-place constructions (e.g., (1)) and monovalent intransitives (e.g., (2)), it has been commonly held that both constructions are syntactically intransitive and marked by the same intransitive affix. Consequently, the construction in (1) has been considered by many to be the intransitive/antipassive counterpart of the Patient Voice construction in (3) (Payne 1982; Mithun 1994; Aldridge 2004, 2012 et seq.; a.o.).

(3) *h<in>abol ni aya si lia.*
chase<PV.PRF> PN.CM₂ A. PN.PIVOT L.

‘Aya chased Lia.’ (Patient Voice; alleged basic transitive)

In (3), the same verb carries a distinct verbal affix <in> and selects a patient argument that can freely undergo relativization. This argument bears the same marker (*si*) as the agent in the Actor Voice construction (1)–(2). In contrast, the agent in (3) carries a different case marker, *ni*, and is inaccessible to relativization²

At first glance, this case pattern shows the hallmarks of ergativity. If two-place AV constructions like (1) were antipassives, the argument-marking pattern of (1) and (3) would suggest that the S of the intransitive/antipassive shares the same marking (*si*) as the P of transitive constructions. This pattern is illustrated in (4).

¹Across Philippine-type languages, monovalent intransitives and two-place AV clauses typically share AV morphology. While different AV variants may occur with different verb classes, they are generally treated as part of a single category characterized by nasal *m/n* morphology.

²Some Tagalog sub-varieties have been reported to allow agent relativization from Patient Voice (Tanaka 2016). We set this variation aside, as it is clearly a recent innovation.

(4) The ergative view of Philippine-type voice alternation in Tagalog

	Actor Voice → alleged antipassive	Patient Voice → alleged basic transitive
agent	<i>si</i>	<i>ni</i>
patient	<i>kay</i>	<i>si</i>

As this alternation constitutes a core part of the grammar of Philippine-type languages, Austronesian is often cited as a hotspot for antipassives (e.g. Polinsky [2013], Mithun [2021]). A key implication of this view is that Philippine-type languages manifest syntactic ergativity, where P in Patient Voice and the alleged S in Actor Voice share accessibility to syntactic operations such as relativization (Payne [1982], Cooreman [1994], Mithun [1994], Liao [2004], Aldridge [2004], inter alia)³. However, the baseline assumption of this analysis relies critically on the antipassive/intransitive view of the Actor Voice construction introduced in [1].

In this paper, we demonstrate instead that Actor Voice constructions in western Austronesian languages—such as the Tagalog example in [1]—do not exhibit the structural properties of true antipassives upon close inspection. While some show a drift toward antipassive-like properties, only a small number of languages have developed constructions that syntactically resemble antipassives, and even these remain atypical. The vast majority of western Austronesian languages therefore lack a true antipassive. Instead, many exhibit a gradient shift in AV constructions toward antipassive-like functions, driven primarily by low patient prominence rather than by argument reduction. We model this gradient as a four-way typology [5] based on investigation of 53 representative languages.

(5) Four types of Actor Voice constructions

- a. **Type I: Spurious antipassive** — retains the core properties of a transitive clause; found in many Philippine-type languages of Taiwan and the Philippines.
- b. **Type II: Grammaticalized functional antipassive** — shows antipassive-like functional properties while remaining structurally transitive; attested in Celebic and South Sulawesi languages such as Mori Bawah and Duri.
- c. **Type III: Semi-antipassive** — displays several antipassive traits but still allow the patient to surface as a core argument; found in languages including Sama Bangingi' (Mindanao) and Embaloh (Borneo).
- d. **Type IV: True antipassive** — meets the core diagnostics of antipassivization, including patient downgrading; attested in Bugis, Seko Padang, and Chamorro.

We argue that Types III and IV reflect a shift toward lower-transitivity structures driven by low patient topicality, whereas prototypical Philippine-type AV constructions (Type I) retain clear hallmarks of syntactic transitivity. Crucially, even where semantic transitivity is reduced, most AV constructions continue to license a patient that behaves as a core argument. This suggests that true patient-demoting operations are relatively rare in western Austronesian languages; instead, argument prominence is typically regulated through discourse-semantic means rather than valency-changing morphology (cf. Richards [2000], Hemmings [2021], Chen [2025]).

³Following Comrie (1989), we use S for the single argument of an intransitive clause, and A and P, respectively, for the agentive argument and patientive argument or a transitive clause.

This paper is structured as follows. Section 2 reviews typological definitions of antipassives. Section 3 outlines the methodology and sampling. Section 4 examines alleged antipassives in Philippine-type languages. Section 5 presents the proposed cline of antipassive-like constructions. Section 6 explores the diachronic development of this cline. Section 7 discusses theoretical and typological implications, and Section 8 summarizes the main findings.

2 Antipassives from a typological view

2.1 Structural properties of antipassives

An *antipassive* is typically characterized as an intransitive verbal construction in which the patient participant of a semantically transitive verb is downgraded, i.e. demoted or suppressed (Dixon 1977, 1994; Dixon & Aikhenvald 2000; Kulikov 2011; Polinsky 2017; Heaton 2017, 2020; Zúñiga & Kittilä 2019; Janic & Witzlack-Makarevich 2021; Creissels 2024; Haspelmath 2025). Dixon (1994: 146) defines it as a construction where a verb that is normally transitive is marked as intransitive; the agentive argument becomes the subject of the intransitive verb, with the patient phrase either demoted to an oblique position or omitted entirely. This process often coincides with aspectual distinctions or greater prominence of the agent (Polinsky 2017; Heaton 2020; Haspelmath 2025; inter alia.).

While there is no full agreement on the structural characteristics of an antipassive, the following traits are commonly identified:

- (6) Structural criteria for antipassives
 - a. An intransitive verbal construction that alternates with a transitive construction in use with semantically transitive lexical verbs.
 - b. The participant coded as P in the transitive construction, e.g. semantic patient, is downgraded, while the participant coded as A in the transitive, e.g. semantic agent, is coded as the sole core argument S of the antipassive.
 - c. Many definitions specify that explicit morphology occurs on the verb, indicating antipassivization.
 - d. Many authors hold that an antipassive is less basic or more marked than the transitive construction, from which it may be said to be derived.

The alternation between a transitive and an intransitive antipassive, as referenced in (6a), is illustrated in (7) below from Chukchi.

- (7) Chukchi
 - a. *tumg-e ŋinqey rəyegtetew-nin.*
 friend-ERG boy.ABS save-AOR.3SG:3SG
 ‘The friend saved the boy.’ (transitive)
 - b. *tumgətum (ŋinqey-ək) ine-nyegtele-gʔi.*
 friend.ABS (boy-LOC) ANTIP-save-AOR.3SG
 ‘The friend saved the boy.’ (Polinsky 2017: 14) (antipassive)

As (6b) indicates, there is broad agreement that antipassives involve downgrading of the patient (P) in a transitive construction (Haspelmath 2025). While terminology varies, this is typically described as realization of the patient as an optional oblique or peripheral phrase, or as a non-core argument (e.g.

Dixon & Aikhenvald 2000; Polinsky 2013). Some definitions require the patient to remain expressible (e.g. Baker 1988; Dixon 1994), whereas others allow for complete suppression (e.g. Foley & Van Valin 1984; Shibatani 1998; Kulikov 2011). We adopt the broader notion of *downgrading* subsuming both demotion and suppression.

Patient downgrading may be reflected in (i) a shift from core to peripheral case or adpositional marking, (ii) absence of agreement, and/or (iii) optionality or non-expression of the patient. Because such diagnostics are language-specific, we evaluate patient status comparatively, relative to transitive constructions in the same language.

There is less consensus regarding whether antipassives must be overtly marked or morphologically derived from a less marked transitive ((6c–d); cf. Dixon 1994; Heaton 2017). Nonetheless, these criteria are often useful in typological work. In particular, Haspelmath (2025) and Heaton (2017) argue that requiring an overtly marked antipassive contrasted with a less-marked transitive yields a sharper and more restrictive definition. Accordingly, we treat morphological marking as relevant—but not definitional—evidence in classifying antipassives, acknowledging that such criteria are not universally adopted (cf. Cooreman 1994; Kulikov 2011).

2.2 Functional properties of antipassives

The structural properties in (6) concern syntactic transitivity in grammatical voice systems, whereas functional properties associated with antipassives, shown in (8), involve semantic transitivity and discourse motivations (Hopper & Thompson 1980). Since the latter are highly context-dependent and gradient, we treat them as secondary and prioritize structural diagnostics. However, functional properties will be discussed below when relevant to the use and development of antipassive(-like) constructions.

- (8) Common functional properties of antipassives
- a. The patient may be indefinite or non-specific, and sometimes obligatorily interpreted as such.
 - b. The clause often bears a partitive reading and the patient is interpreted as less affected.
 - c. The denoted event tends to be interpreted as less telic and/or non-punctual.
 - d. The antipassive may take an agent argument that exhibits higher topicality, accompanied by a patient with low topicality in discourse.
 - e. The antipassive is less frequent in discourse than basic transitive clauses.

3 Methodology and sampling

Western Austronesian languages exhibit substantial variation in their voice systems. Philippine-type languages (Taiwan and the Philippines) typically show a productive four-way voice alternation, including Actor Voice (AV) (see Section 7.1). Some languages in northern Borneo and northern Sulawesi retain a reduced Philippine-type system, generally preserving the AV–PV contrast but with reduced productivity of additional voices. Most western Indonesian (“Indonesian-type”) languages employ a two-way AV–PV system and lack the additional voices characteristic of Philippine-type languages. In central and southern Sulawesi, AV–PV alternations persist, but AV constructions are often functionally restricted. By contrast, most languages of East Nusantara—including the Lesser Sunda Islands east of Lombok, the Maluku, and the Bird’s Head of New Guinea—lack productive voice-related verbal morphology (Klamer 2010); a similar pattern is also found in some western Indonesian languages such as Nias and Acehnese (Brown 2001; Durie 1985).

These patterns broadly correlate with a north–south reduction in morphosyntactic complexity, including fewer verbal categories, reduced case marking, and diminished affixal productivity. For expository purposes, we divide the western Austronesian region into five zones: Zone A (Taiwan and the Philippines), Zone B (northern Borneo and northern Sulawesi), Zone C (western Indonesia), Zone D (central and southern Sulawesi), and Zone E (East Nusantara).

We examine Actor Voice constructions across these zones, focusing on the syntactic status of the patient and whether AV constructions meet structural criteria qualifying them as antipassives. We analyze 53 well-documented languages, including 9 from Taiwan, 13 from the Philippines, 7 from Borneo, 6 from Sumatra, 3 from Java, 2 from the Lesser Sundas, and 10 from Sulawesi.

(9) Antipassive characteristics examined in this paper

	(Y, N)	additional info
1 Does the alleged AP construction bear overt antipassive marking?	(Y, N)	(if Y, specify form)
2 Does the language bear overt marking for monovalent intransitive?	(Y, N)	(if Y, specify form)
3 Does the language bear overt marking for basic transitive?	(Y, N)	(if Y, specify form)
4 Can a patient be expressed in the alleged AP construction?	(Y, N)	(if Y, optional or obligatory?)
5 Can an overt patient be definite?	(Y, N)	–
6 How are antipassive patients marked or indexed?	–	(specify)
7a How are transitive agents marked or indexed?	–	(specify)
7b How are antipassive agents marked or indexed?	–	(specify)
7c How are monovalent intransitive agents marked or indexed?	–	(specify)

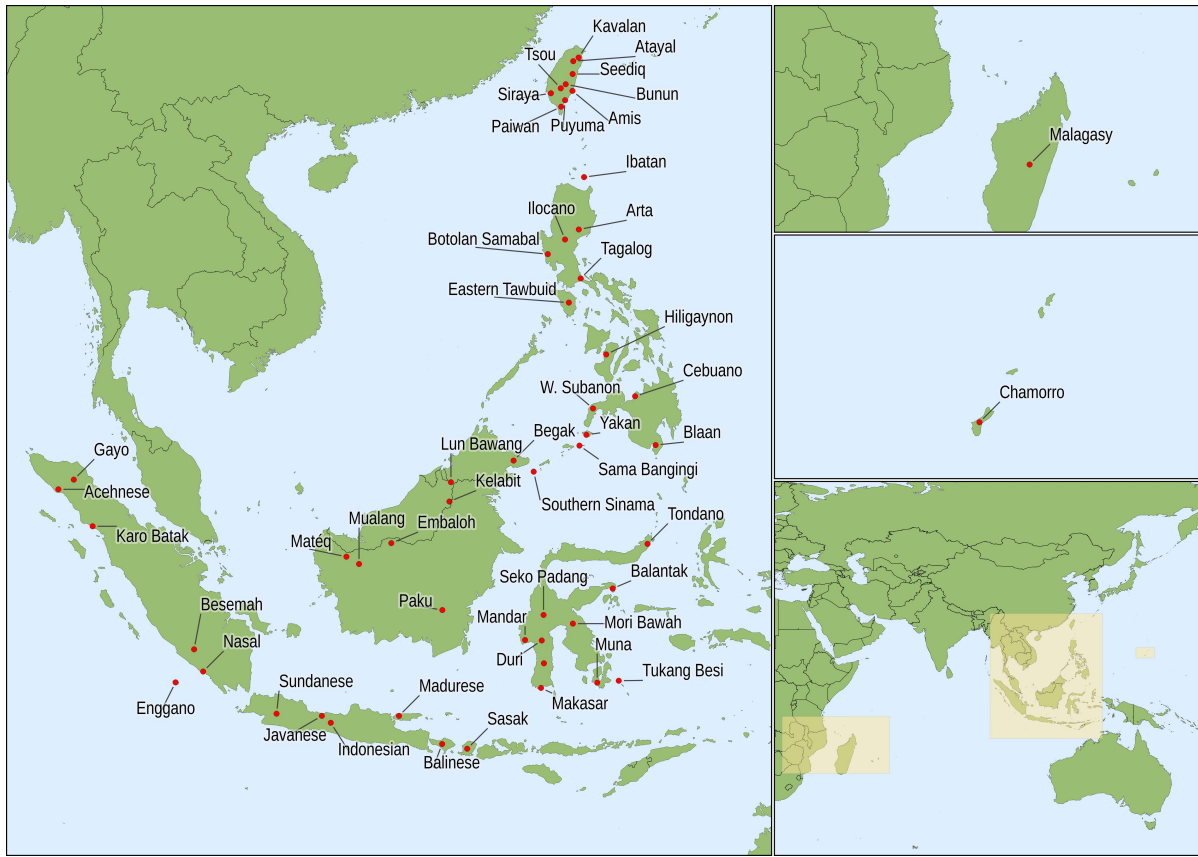
Building on (9), we identify four diagnostics for distinguishing a cline of antipassive-like AV constructions, summarized in (10) and discussed in Section 5.

(10) Four key criteria for classifying western Austronesian AV constructions

- a. Can the patient be definite and/or specific? (Y, N)
- b. Is the patient marked by a peripheral case or adposition? (Y, N)
- c. Can the patient be freely omitted without a given context? (Y, N)
- d. Does the construction carry specific valency-decreasing morphology not present in monovalent intransitives? (Y, N)

Applying these four criteria to the sampled languages—selected based on (i) availability of detailed syntactic description, (ii) prior claims or evidence of antipassives, and (iii) the presence of a distinct AV construction—yields four types, as summarized earlier in (5). We begin by discussing Type 1 in Section 4, and then examine the remaining types in Section 5. The full language list appears in Appendix I, with their geographic distribution shown in (11).

(11) Geographic distribution of languages examined



4 The western Austronesian pseudo antipassives: Zone A languages

We begin with Zone A, where Philippine-type languages predominate and Actor Voice constructions have traditionally been analyzed as antipassives (e.g. De Guzman 1976; Payne 1982; Gerdtz 1988; Mithun 1994; Aldridge 2004). Zones B–D are discussed in Sections 5 and 6.

4.1 Structural properties

4.1.1 Status of the patient

A defining feature of an antipassive is downgrading of the patient. If expressed, the patient phrase shows characteristics of an oblique rather than a core argument. We understand ‘core argument’ to refer to syntactic units that are selected and required by a predicate, and which are associated with structural relations and distinguished by special coding and behavioral properties (e.g. S, A, P) (see e.g. [Andrews 2007](#)). Does the patient phrase in the putative antipassive constructions in Zone A languages show properties characteristic of a non-core argument? Based on observed properties of core arguments in other constructions, we apply three criteria to clarify the syntactic status of the putative antipassive patients:

(12) Patient properties to be examined

- a. **Coding:** does the patient phrase carry case-marking or otherwise show patterns of indexing distinct from that of core arguments?

- b. **Optionality**: is the patient phrase freely omissible or suppressed, unlike other core arguments?
- c. **Capacity to participate in syntactic operations**: is the patient phrase constrained from types of syntactic operations accessible to core arguments?

4.1.1.1 Coding of the patient

Do putative antipassive patients in Zone A languages show peripheral case-marking or non-core indexing? The answer is no. Although these patients bear case markers distinct from those of Patient Voice pivots (i.e. pivot marking signaling syntactic prominence), they are marked with the same case used for other core arguments, including (i) causees in causatives, (ii) themes in ditransitives, and (iii) patients in Locative Voice (LV) and Circumstantial Voice (CV) constructions. This pattern is consistent across Zone A (Philippine-type languages; see Chen 2025 for discussion). Consider the data below for Constructions (i) and (ii).

(13) Tagalog

- a. *Nag-kurot si aya kay maria.*
AV.PFV-pinch PN.PIVOT A. PN.CM₁ M.
'Aya pinched Maria.' (alleged antipassive patient: *kay*-marked)
- b. *I-p<in>a-kanta=ko kay ivan ang kanta.*
CV-CAUS<PRF>sing=1SG.CM₂ PN.CM₁ I. PIVOT song
'I asked Ivan to sing a song.' (causee: *kay*-marked)
- c. *I-p<in>akita ni juan kay maria ang kanyang nobya.*
CV<PRF>show PN.CM₂ J. PN.CM₁ M. PIVOT 3SG.POSS girl.friend
'Juan showed Maria his girlfriend.' (causee: *kay*-marked)

(14) Amis

- a. *Mi-nengneng ci mama t-una kolong.*
AV-see PN.PIVOT father CM₁-that cow
'Father saw that cow.' (alleged antipassive patient: *t*-marked)
- b. *Pa-pi-takaw-en aku t-una wawa k-una paysu.*
CAUS-TR-steal-PV 1SG.CM₂ CM₁-that child PIVOT-that money
'I will ask that child to steal that money.' (causee: *t*-marked)
- c. *Pafeli-an aku k-una wawa t-una paysu.*
give-LV 1SG.CM₂ PIVOT-that child CM₁-that money
'I gave that child that money.' (ditransitive theme: *t*-marked)

Now consider the examples below illustrating the case pattern of (iii), exemplified with CV-marked constructions (15)–(16). In these languages, the patients in LV and CV constructions are generally analyzed as core arguments rather than antipassive patients. The fact that such patients are marked with CM₁ therefore suggests that this marker cannot straightforwardly be treated as an oblique marker signaling patient downgrading.

(15) CM₁-marked patient in CV constructions

- a. Tagalog
I-p<in>ampalo=ko ang kanyang pamalo kay juan.
CV-<PRF>hit=1SG.CM₂ PIVOT 3SG.POSS stick PN.CM₁ J.

‘I hit Juan with his stick.’ (theme of 3-place clause: *kay*-marked)

b. Amis

Sa-pi-tangtang aku t-una futing k-una wawa.
 CV-TR-cook 1SG.CM₂ **CM₂-that fish** PIVOT-that child

‘I cooked that fish for that child.’ (theme in 3-place clause: *t*-marked)

(16) Philippine-type alignment: schematized case pattern⁴

	a. AV	b. PV	c. LV	d. CV
agent	Pivot	CM ₂	CM ₂	CM ₂
patient	CM₁	Pivot	CM₁	CM₁
locative	P ₁	P ₁	Pivot	P ₁
instrument/benefactor	P ₂	P ₂	P ₂	Pivot

Although in some Philippine-type languages CM₁ also marks non-locative adjuncts that are not selected by the verb (e.g. non-pivot instrument or benefactive phrases), it should not be treated as a dedicated non-core case marker. As shown above, CM₁ is compatible not only with such adjuncts but also with arguments that are independently identifiable as core arguments. In some languages, adjuncts marked by CM₁ are additionally introduced by an overt preposition (e.g. the Tagalog examples in (1)), whereas in others they are not (e.g. most Formosan languages; see McDonnell and Chen 2022 for discussion). In the latter case, CM₁ is best analysed as a default marker for phrases that are neither the pivot nor the grammatical subject, regardless of whether they are core arguments of the verb. Consequently, because the case marker found on AV patients also occurs with arguments that are independently established as core, its presence alone cannot be taken as reliable evidence for patient demotion.

4.1.1.2 Optionality of the patient

Optional omission of the patient is another possible diagnostic for patient downgrading in an antipassive, among other indicators (Section 2.1). By contrast, in the putative antipassive constructions considered here, to our knowledge, patient omission is ungrammatical without contextual recoverability—a restriction in these languages that also applies to other core arguments. This is illustrated with the data below.

(17) a. Tagalog

*b<um>ili ang babae *(ng kendi).*
 <AV>buy PIVOT woman (INDF.CM₁ candy)

‘The woman bought candy.’

b. Puyuma

*trima na babayan *(dra patraka).*
 <AV>buy PIVOT woman (INDF.CM₁ meat)

‘The woman bought meat.’

c. Amis

⁴Philippine-type languages typically employ a dedicated preposition for locative adjuncts, hence the distinction between P₁ and P₂.

*mi-qaca k-una fafahi *(t-u talacay).*
 AV-buy PIVOT-that woman (CM₁-that pineapple)
 ‘That woman is buying fruit.’ (Chen 2017: 37)

This constraint is documented in Puyuma (Ross & Teng 2005: 763), Tagalog (Katagiri 2005: 165), Subanon (O’Brien 2016), Seediq (Huang 2002: 685), and Tsou (Huang 2002: 760), including evidence from natural texts in Tsou and Seediq. With the exception of Tagalog and Subanon, these languages belong to distinct primary branches of Austronesian, suggesting that the constraint is a canonical property of Philippine-type languages.

Accordingly, the patient in these constructions behaves as a core argument rather than a down-graded oblique. This generalization excludes verbs that are commonly ambitransitive cross-linguistically, e.g. *eat*, and *drink*, which have sometimes been cited as the sole evidence for an antipassive analysis of Tagalog AV (see 18).

(18) Tagalog

k<um>ain=ako.
 <AV>eat=1SG.PIVOT

‘I eat.’ (Aldridge 2012: 6) (Ambitransitive verb)

As shown by O’Brien (2016) ambitransitive verbs permit patient omission even in languages that otherwise prohibit such omission without contextual support (e.g. Subanon in 19a–b)). Accordingly, examples involving ambitransitives must be treated with caution in evaluating antipassive diagnostics.

(19) Subanon

a. *k<in-um>an og libun.*
 <REAL.AV>eat PIVOT woman

‘The woman ate.’ (Patient omission with an ambitransitive verb)

b. **d<inum>api’ og gotow*
 <REAL.AV>slap PIVOT man

‘The man slapped.’ (Patient omission banned with a non-ambitransitive verb)

(O’Brien 2016: 11)

4.1.1.3 Accessibility to syntactic operations

We have shown that putative antipassives retain a patient phrase that behaves as a core argument in terms of case marking (4.1.1.1) and optionality (4.1.1.2). The remaining question is whether it is also syntactically core. Cross-linguistically, syntactic operations follow the relational hierarchy in 20, with obliques showing the lowest accessibility.

(20) The Relational Hierarchy

subject > direct object > indirect object > obliques (Pullum 1977)

Under 20, antipassive patients should behave as syntactic obliques when expressed. Contrary to this expectation, in Philippine-type languages the patient phrase in putative antipassives participates in operations typically restricted to core arguments. In particular, such patients can serve as controllees in AV-marked control constructions, as shown in (21). In these constructions, they are case-marked by the matrix verb, function as agents of the embedded event, and are obligatorily present unless omitted for discourse reasons. This pattern supports their analysis as core arguments.

(21) Object control construction

- a. *Muwai kanku pa-trima dra kiping i nanali.*
AV.permit 1SG.CM₁ CAUS-buy INDF.CM₁ clothes PN.PIVOT my.mother
'My mother permitted *me* to buy clothes.' (Puyuma)
- b. *Nagpabili kay maria ng bigas ang nanay.*
PFV.AV-CAUS-buy PN.CM₁ M. INDF.CM₁ rice PIVOT mother
'Mother let *Maria* buy some rice.' (Kroeger 1993: 197) (Tagalog)

Additional evidence comes from the raising-to-object construction, which is highly productive in Philippine-type languages. In this construction, a complex sentence is introduced by a knowledge or perception verb, and the pivot of the complement clause is allowed to optionally surface in the matrix object position. Crucially, when the matrix verb is marked for AV, the pivot phrase of the embedded clause carries the same case-marking as the ordinary patient of two-participant AV clauses, i.e., the same coding as a putative antipassive patient. Consider (22) below from Tagalog.

(22) Tagalog raising-to-object

- a. *Um-aasa ako [na mai-pasa ni juan ang exam].*
AV-hope 1SG.PIVOT [C PV.SBJ-pass PN.CM₂ J. CN.PIVOT exam].
'I hope that *Juan* will pass the exam.' (non-raising version)
- b. *Um-aasa ako kay juan; [na ma-i-pasa niya; ang exam].*
AV-hope 1SG.PIVOT PN.CM₁ J._i [C PV.SUBJ-pass 3SG.CM_{2i} CN.PIVOT exam].
'I hope that *Juan* will pass the exam.' (Chen 2025: 21) (raising of the embedded agent to the alleged antipassive patient position)

These data pose a significant challenge to the antipassive analysis of AV constructions, as it is cross-linguistically rare—if not entirely unattested—for a core argument of the embedded clause to be optionally realized as a syntactic oblique in the matrix clause. Conversely, this pattern follows naturally from a raising-to-object analysis if the so-called antipassive patient position in the matrix clause is in fact an accusative position for a core argument.⁵

4.1.2 Verbal morphology

Although overt verbal morphology is not universally taken as definitional of antipassives (see section 2.1 and Heaton 2020 for an overview; see also Creissels 2024, Maslova 2003, and Comrie et al. 2021), some authors nonetheless require antipassive constructions to be morphologically more marked than the corresponding basic transitive (cf. Klaiman 2005, Kulikov 2011, Heaton 2017). The putative antipassives discussed here, however, show no clear morphological evidence of derivation from a basic transitive and lack obvious valency-decreasing morphology.

This pattern is illustrated below with data from Paiwan (23), which has been analyzed as possessing an antipassive construction; the same pattern is found in Tagalog and other Zone A languages.

(23) Paiwan

- a. *?au-?aung ti baleng.*
RED<AV>-cry PIVOT.PS.SG B.
'Baleng is crying.' (monovalent intransitive)

⁵See Chen (2025) for specific arguments in favor of an accusative analysis for the case assigned to alleged antipassive patients.

- b. *na=?alup ti palang ta vavuy*
 PERF=hunt<AV> PIVOT.PS.SG P. CM₁ wild.pig
 ‘Palang hunted wild pigs.’ (putative antipassive)
- c. *d<in>ukuL ti kui ni zepul.*
 <PV>hunt PIVOT.PS.SG K. CM₂ Z.
 ‘Zepul has beaten Kui.’ (Chang 2006: 113, 192, 417) (putative basic transitive)

These data show that the putative antipassive does not display additional morphological marking relative to the corresponding transitive construction, which instead exhibits an equally marked and non-overlapping pattern. Its verbal morphology is also largely indistinguishable from that found in mono-valent intransitive clauses. As a result, there is no clear morphological evidence that the construction involves valency reduction relative to a more basic transitive (Foley 2008, Campbell 2000, Heaton 2017). While this pattern does not by itself rule out an antipassive analysis, the constructions nonetheless lack clear morphological cues associated with valency-decreasing operations⁶

Thus, while morphological marking is not required in some definitions of antipassives, in the absence of clear evidence of patient downgrading (as argued above), the lack of morphological evidence as well leaves us with little indication that these constructions resemble antipassives structurally.

4.2 Functional properties

We turn now to the functional properties of the putative antipassives in Zone A languages, as compared to antipassives in the literature (Section 2.2).

4.2.1 Definiteness of the patient

A commonly reported functional property of antipassives is lower definiteness or individuation of the patient (Heath 1976, Cooreman 1994): antipassive patients are often obligatorily indefinite or non-specific, and the predicate may be marked for plural number, indicating lower individuation.

The putative antipassives in Zone A languages behave differently. Many have noted that definite and/or specific patients can appear in AV constructions without reduction in individuation⁷. Examples below from four Philippine-type languages illustrate this: in each case, the alleged antipassive contains a definite and specific patient modified by a determiner, demonstrative, or possessive pronoun.

(24) Compatibility of definite/specific patients in Philippine-type AV clauses

a. Malagasy

nanapahan'i sahondra ity hazo ity nu antsy.
 PST.AV.cut S. **this tree this** DET knife

‘Sahondra cut this tree with the knife.’ (Paul & deMena Travis 2006: 316)

b. Amis

mi-takaw cingra t-una paysu.
 AV-steal 3SG.PIVOT **CM₁-that money**

‘He stole that money.’ (ODFL n.d.)

c. Paiwan

⁶This should be distinguished from cases in which an antipassive marker is homophonous with related valency-decreasing affixes such as reflexive, middle, or reciprocal markers (Dixon 1994, Comrie 1989, Givón 1984, Creissels 2024).

⁷Following convention in the literature, we define definite NPs as those modified by a determiner, demonstrative, or possessive pronoun, or expressed as proper names or free pronouns.

taliw anan aken tua ku tseqelap, aya ti sapayas.
 <AV>whet.stone still 1SG.PIVOT **CM₁ my knife** say PIVOT.PS.SG S.

‘I’ll just sharpen my sword,’ said Sapayas.’ (Early & Whitehorn 2003 Text 34: 020)

d. Subanon

k<um>an si uan nog saging koyon
 <AV.IRR>eat PIVOT J. **NPIVOT banana DET**

‘Juan will eat that banana.’ (O’Brien 2016)

Only a subset of Philippine-type languages (e.g., Tagalog, Cebuano, Kapampangan) are reported to prefer indefinite/non-specific patients in AV clauses. However, even in these languages, definite patients remain possible with the AV construction. Consider (25).

(25) a. Tagalog

B<um>isita si juan sa hari nang nagiisa.
 <AV>visit PN.PIVOT J. **CN.DEF.CM₁ king** ADV AV.IPFV-one

‘Juan visited the king alone.’ (Kroeger 1993: 41)

b. Cebuano

Nag-tindak siya kaniya.
 AV-kick 3SG.PIVOT **3SG.CM₁**

‘He kicked him.’ (Bunye & Yap 2019: 34)

c. Kapampangan

Mánig-áral=ya=ng ∅ Kapampángan i Mike.
 AV-study=3SG.PIVOT=LK **CM₁ Kapampángan** PN.PIVOT Mike

‘Mike is studying Kapampangan.’ (Forman 1971: 66)

Furthermore, as also shown in the examples above, AV constructions across these languages allow pronominal patients, indicating that the patient may be specific and highly individuated, as in (26). In addition, putative antipassive patients in Philippine-type Austronesian languages can be freely modified by relative clauses (27), further suggesting that the patient may be definite and specific.

(26) Pronominal patient in Philippine-type AV constructions

a. Kavalan

babar ti-utay timaku.
 AV.punch CL.PN-U. **1SG.CM₁**

‘Utay punched me.’ (Huang 2005: 788)

b. Puyuma

Sagar=ku kanu.
 AV.like=1SG.PIVOT **2SG.CM₁**

‘I like you.’ (primary data)

(27) Tagalog relativization

Na-ka-kita=ako ng lalaki=ng [gusto si Aya].
 AV.PRF-RED-see=1SG.PIVOT **CM₁ man=LK** like.PV PN.PIVOT A.

‘I came across the man [who likes Aya].’ (primary data)

In short, AV constructions in Philippine-type Austronesian languages typically allow definite and specific patients without signs of reduced individuation, unlike antipassives in many other languages. A few languages (e.g. Tagalog, Cebuano, Kapampangan) show a preference for less specific patients in AV clauses, however, this is not a strict constraint.

4.2.2 TAM and other semantic properties

Cross-linguistically, antipassives are associated with reduced semantic transitivity, often reflected in aspect, mood, and patient affectedness (Hopper & Thompson 1980), and commonly correlate with non-telic or non-punctual readings (e.g. habitual, iterative, durative, imperfective/progressive) (Cooreman 1994; Dixon 1994).

Similar tendencies have been reported for Philippine-type languages. AV patients may be interpreted as less affected than PV patients (e.g. Huang 2002; Liao 2004; Nolasco 2005), Tagalog AV has been argued to favour atelic readings over PV (Himmelmann 2005), and PV in some Formosan languages has been linked to bounded-event interpretations, possibly due to greater patient prominence (Ross & Teng 2005). However, broader comparison reveals substantial cross-linguistic variation in the default aspectual profiles of voice constructions, as in (28) for AV, PV, and LV across six languages:

(28) Default aspectual interpretation of voice constructions

	AV	PV	LV	Source
a. Atayal/Seediq	imperfective	(future)	perfective	Huang 2005
b. Puyuma (Nanwang)	perfective	perfective	perfective	Teng 2008
c. Paiwan (Northern)	perfective	perfective	perfective	Chang 2006
d. Amis (Central)	imperfective	future	?	Wu 2006
e. Tagalog	(must be inflected with an aspect marker)			Schachter & Otanes 1972
f. Malagasy	imperfective	perfective	n/a	Pearson 2012

As (28) shows, there is no uniform default aspectual interpretation for AV across Philippine-type languages. Additionally, verb-specific idiosyncrasies are commonly observed. We therefore conclude that while some Zone A languages exhibit antipassive-like functional properties for AV (reduced affectedness; non-telic readings), these are gradient tendencies rather than categorical semantic properties, and these languages show substantial variation overall.

4.2.3 Topicality of participants

Another common trait of an antipassive is low topicality of the semantic patient as a referent across spans of clauses in connected discourse (Cooreman 1994; Vigus 2018). Consider below in (29) the typical relative topicality of agent and patient in three clause types discussed in Cooreman, Fox & Givón (1984) and Givón (1994). In the table, a double arrow indicates a greater degree of difference in relative topicality than a single arrow.

(29) Clause type and relative topicality of agent and patient

Active/ergative	actor > patient	patient is topical, but agent more so
Passive	actor « patient	agent is non-topical and frequently omitted
Antipassive	actor » patient	patient is non-topical and frequently omitted
Inverse	actor < patient	agent is topical, but patient more so

In accordance with (29), the patient in an antipassive clause is expected to show properties consistent with a non-topical element with respect to relevant indicators, e.g. syntactic coding, referential distance, and topic persistence.

Do the alleged antipassives behave similarly in exhibiting low patient topicality? Indeed, various Zone A languages are reported to exhibit AV patients with low topicality. Cooreman, Fox & Givón (1984) show that AV patients in Tagalog have significantly lower topic continuity than agents. Similarly, Huang (2002) in a comparative study of Seediq and Tsou, reports that agents in both AV and PV constructions are significantly more topical and continuous than patients, and this pattern is particularly strong in AV constructions, as patients are only highly continuous in 5.7% (Tsou) and 21.6% (Seediq) of AV clauses in narratives (Huang 2002: 680–681). A similar observation is made for Cebuano. Payne (1982: 346) reports that the patient in AV constructions is consistently low in prominence and non-topical, showing low topic persistence for 79% of AV clauses examined.

Hemmings (2015) observes a similar pattern in Cebuano, as well as Kelabit (Zone B) and Indonesian (Zone C). As shown below, in both AV and non-AV constructions (termed UV in Hemmings’ work), the patient consistently exhibits significantly lower topicality than the agent. See also for similar observations on the discourse properties of participants and voice selection from Zone C western Indonesian languages: Gayo (Eades 2005: 175–177), Javanese (Ewing 1999: 209–212), Besemah (McDonnell 2016: 232–235), and Balinese (Pastika 2006).

(30) Topicality in the Cebuano, Kelabit, and Indonesian AV constructions (Hemmings 2015: 401)

	AV		UV	
	Mean Actor	Mean Undergoer	Mean Actor	Mean Undergoer
Cebuano	0.41	0.18	0.89	0.18
Kelabit	0.80	0.48	0.89	0.46
Indonesian	0.53	0.36	0.27	0.53

We may therefore assume that low topicality is a common trait of patients in AV constructions, in particular in Philippine-type (Zone A) Austronesian languages, (and some Zone B and C languages of Borneo and western Indonesia). See Section 6.2 for a theoretical explanation of this characteristic.

4.2.4 Textual frequency

A further functional property concerns textual frequency. Cross-linguistically, antipassives are typically far less frequent than basic transitives: Givón (1994) reports antipassives at roughly 10–15% of clauses, compared to 60–70% for ergatives, 5–10% for passives, and 15–20% for inverse voice. This low frequency may be attributed to the low topicality and individuation of antipassive patients (Vigus 2018).

By contrast, putative antipassives in Zone A occur at much higher rates. In Tagalog narratives in two representative studies, AV clauses comprise 41% of 500 sentences (Constantino 1971: 126) and 27% of 5000 sentences (McFarland 1984: 236), far exceeding typical antipassive frequencies. This strongly suggests that AV constructions in Tagalog do not pattern like true antipassives.

Similar patterns are reported in several Philippine-type languages of Taiwan, as in (31). These data indicate that AV constructions occur far more frequently than typical antipassives (~10–15% of clauses). Moreover, AV constructions are more frequent than any other non-Actor Voice types—a distribution that would be unexpected if AV were an antipassive.

- (31) Textual frequency of voice types in five Philippine-type Formosan languages (Huang 2002: 786)

	Actor Voice	Patient Voice	Locative Voice	Circumstantial Voice
Tsou	57.5%	27.2%	12.3%	2.9%
Atayal	48.2%	29.9%	17.7%	4.2%
Saisiyat	77%	19.2%	0%	3.8%
Seediq	66.3%	15.8%	15.6%	2.5%
Tagalog	56.5%	31.7%	10.3%	1.4%

Hemmings (2015) reports similar findings for Cebuano (Zone A), as well as for Kelabit (Zone B) and Indonesian (Zone C). In Cebuano, AV constructions account for 25% of tokens, whereas in Kelabit and Indonesian they occur with substantially higher textual frequency—62% and 75%, respectively—exceeding that of non-AV clauses. Nonetheless, in all three cases, the AV construction occurs at much higher rates than typically observed for antipassives.

Evidence from textual frequency thus suggests significant differences in the functional properties of AV constructions in Zone A Austronesian languages, compared with those commonly associated with antipassive constructions cross-linguistically.

4.3 Interim conclusion

In sum, the alleged antipassives found in Philippine-type western Austronesian languages diverge from standard typological definitions of antipassives in several key structural properties:

- (32) a. The patient is case-marked as a core argument.
 b. The patient cannot be freely omitted without prior discourse context.
 c. The patient remains accessible to syntactic operations unavailable to obliques.
 d. The construction is not more morphologically marked relative to the corresponding transitive, nor does it exhibit valency-decreasing morphology.

Moreover, in many Zone A languages, these constructions also lack several functional properties commonly associated with antipassives, except for the shared tendency toward low patient topicality (4.2.3):

- (33) a. The construction readily occurs with definite and highly specific patients.
 b. Reduced telicity or patient affectedness is not consistently observed.
 c. The construction displays a much higher textual frequency than typical antipassives.

A key implication of this finding concerns the ergative approach to Philippine-type Austronesian languages. As discussed in Section 7.1, this analysis depends crucially on treating Actor Voice clauses as syntactically intransitive and on aligning the Actor Voice subject with the Patient Voice patient, as shown in (34).

- (34) Philippine-type voice alternation following the intransitive view of the AV construction

	Actor Voice	Patient Voice
agent	S (pivot-marking)	A (CM ₂)
patient	OBL (CM ₁)	P (pivot-marking)

This approach is based primarily on two observations: first, that AV morphology occurs both with monovalent intransitives and with semantically transitive verbs; and second, that putative antipassive patients tend to be indefinite and bear coding that is also found with certain non-locative adjuncts.

Our findings, however, challenge this interpretation. When a broader set of diagnostics is considered—including omissibility, syntactic accessibility, and coding patterns in causative and ditransitive constructions—AV clauses consistently display the structural properties of transitive clauses. They contain a core patient argument and do not differ from PV clauses in clausal transitivity. Consequently, the AV–PV alternation should not be regarded as evidence of ergative–absolutive alignment in these languages. Rather, it is more appropriately analyzed as shown in (35):

- (35) Philippine-type voice alternation following the transitive view of the AV construction

	Actor Voice	Patient Voice
agent	A (pivot-marking)	A (CM ₂)
patient	P (CM ₁)	P (pivot-marking)

Given this, the remaining question is how AV-marked constructions should be classified. We address this issue next by proposing a typology of AV subtypes across Zones A–D (Section 5) and outlining a diachronic pathway for their development (Section 6).

5 Austronesian AV-marked constructions: A cline of (in)transitivity

We now extend our discussion to Zones B, C, and D, where the attested AV constructions in some languages display additional traits of antipassives. The table below presents a cline of AV constructions found across the 53 surveyed languages, divided into four subtypes.

- (36) Four types of AV constructions in western Austronesian languages

	Type	Criterion	Examples
I	Spurious antipassive	Patients are obligatory without given context, may be definite, and share case-marking with core arguments in other constructions.	Formosan languages. Tagalog, most Philippine languages
II	Functional antipassive	Patients are obligatorily indefinite and coded as a bare NP	Mori Bawah, Duri
III	Semi-antipassive	Patients are frequently omitted and may be marked as an oblique or surface as a bare NP.	Sama Bangingi', Embaloh
IV	True antipassive	Patients are optional or suppressed; when present, are marked as oblique or incorporated into the verb.	Chamorro, Bugis, Seko Padang

We propose that Type I constructions are syntactically transitive, with a syntactically prominent agent bearing high topicality. The tendency towards lower semantic transitivity in some constructions sharing this morphological marking has arisen due to low topicality of the semantic patient. In a subset of western Austronesian languages, this has been grammaticalized, leading to changes in the coding, indexing, and/or behavioral properties of the patient phrase.

5.1 Type I: Spurious antipassive

In most Zone A (Philippine-type) languages, and many Zone B/C languages, the AV construction displays core properties of a transitive. We classify it as a *spurious antipassive* (37):

(37) **Spurious antipassive**

The patient is obligatorily present without contextual support, may be definite, and bears the same case marking as core arguments in other transitive constructions.

This construction shows no clear morphological evidence of detransitivization or valency reduction. AV shares its verbal morphology with monovalent intransitives, and Philippine-type systems lack dedicated valency-decreasing morphology (Section 4.1.2), reflecting the inherited distribution of Proto-Austronesian Actor Voice morphology (see 6.1.1).

The alleged antipassive patient also lacks oblique properties: it bears the same case marking as other core arguments (Section 4.1.1.1) and participates in syntactic operations typically restricted to core arguments (Section 4.1.1.3). Thus there is little morphological or syntactic evidence for patient downgrading, in line with previous transitive analyses of Philippine-type AV constructions (Pearson 2005; Richards 2000; Rackowski 2005; Hemmings 2021; O'Brien 2016; Chen 2017; inter alia).

Spurious antipassives are also compatible with definite or highly specific patients and generally disallow patient omission without contextual licensing (4.2.1; 4.1.1.2). The core properties are summarized in (38).

	Type I Spurious antipassive
(38) a. Can the patient be definite and/or specific?	Yes
b. Is the patient marked by a peripheral case or adposition?	No
c. Can the patient be freely omitted without a given context?	No
d. Does the construction show morphological cues of detransitivization or valency reduction?	No

The distribution of Type I constructions in our survey is shown in (39). They occur across Zones A–D and are attested in both Philippine-type and Indonesian-type languages. We discuss the implications of this distribution in Section 6.

(39) Distribution of Type I constructions



5.2 Type II: Functional antipassive

We now turn to the second subtype on the cline, termed the *functional antipassive* following Mead (1999). These constructions exhibit some of the functions typically associated with antipassives while retaining key structural properties of transitive constructions:

(40) Functional antipassive

The patient in this type of construction is obligatorily indefinite and coded as a bare NP.

This construction is found in a subset of languages of Sulawesi. It features a grammatical restriction constraining the patient of a transitive verb stem to be indefinite. The patient phrase is realized as a bare NP, and generally does not receive oblique marking, while other obliques are regularly marked with a preposition. The patient is not indexed with a bound pronominal on the verb complex, while the patient in basic transitive clauses (usually zero-marked) is typically indexed with a pronominal clitic.

Consider (41) below from Mori Bawah (Celebic). In the basic transitive in (41a), the verb is zero-marked; P is a definite NP (*ana-no* 'her children'), and indexed as a enclitic (= 'ira 3PL.ABS) on the verb. In the functional antipassive in (41b), the verb bears the prefix *poN-*, and the patient is expressed as an indefinite NP (*singa* 'a lion') and is not indexed on the verb.

(41) Mori Bawah

- a. ...*ka=i pepate='ira ana-no.*
 and=3SG kill=3PL child-3SG.POSS
 '...and she killed her children.'

(basic transitive)

- b. ...*ka=i pom-pepate singa*.
 and=3SG **ANTIP**-kill lion
 ‘...and he killed a lion.’ (Mead 2005: 698) (functional antipassive)

Type II constructions do not qualify as true antipassives, because the patient NP shows a number of properties consistent with that of a core argument. It is not marked by a preposition, unlike oblique NPs in other verbal clauses. Additionally, particularly in South Sulawesi languages, an overt patient NP is obligatory rather than optional. An example from Duri (South Sulawesi) is shown below. In the functional antipassive in (42b), the patient is obligatorily indefinite, and must be overtly expressed, but is not marked with a preposition, which otherwise is used to signal oblique relations.

(42) Duri

- a. *pura mu=saeq=i joo dea*
 already 2.FAM=cut=3 DEF grass
 ‘You have cut that grass.’ (basic transitive)
- b. *n-ampaq=naq akua-na kokoq lungkun bene!*
ANTIP-get=1SG 1SG-EMPH mushroom just.grown girls
 ‘I found a fresh mushroom, girls!’ (Valkama 1993: 20, 23) (functional antipassive)

While the patient in a functional antipassive is not indexed on the verb, indexing with a pronominal clitic in these languages does not necessarily correlate with core argument status. For example, the P argument of a basic transitive also is not indexed on the verbal complex in certain cases, e.g. when the clause expresses a general state of affairs, when P is given information, when P is fronted for focus, among others (see e.g., Valkama 1993; Mead 1998; Jukes 2020).

Many Type II constructions show other functional properties commonly associated with antipassive, such as non-telic aspect and partitive interpretation. For example, in Mori Bawah, the functional antipassive is used when the patient represents only part of a larger entity (Mead 1999).

We classify this type of construction into a separate category, as they differ from spurious antipassives by imposing a definiteness/specificity constraint on the patient and featuring clear morphological markers for derived status in most cases, alongside some additional functional properties indicating lower semantic transitivity. However, the patient phrase retains key properties of a core argument: it is not freely omissible, and is realized as a bare NP, a form of syntactic coding characteristic of core arguments. A comparison with Type I constructions is given in (43).

	Type I Spurious antipassive	Type II Functional antipassive
(43) a. Can the patient be definite and/or specific?	Yes	No
b. Is the patient marked by a peripheral case or adposition?	No	No (bare NP)
c. Can the patient be freely omitted without a given context?	No	No
d. Does the construction show morphological cues of detransitivization or valency reduction?	No	(varies)

Note that some languages show both a Type I and Type II construction, and these two may even show the same form of morphological marking (but differ in indexing of arguments). This is discussed in further detail in Section 6.2.

As shown in (44), Type II construction is restricted to central and south Sulawesi (Zone D) and Sasak, a neighboring language spoken in Lombok (Zone C). Implications of this distribution are discussed in Section 6.

(44) Distribution of Type II constructions



5.3 Type III: Semi-antipassive

Type III constructions are characterized by optional marking of the patient NP as oblique. Found in a small subset of western Austronesian languages (Yakan, Sama Bangingi', and Embaloh), they permit free omission of the patient phrase and marking of the patient with a peripheral case or preposition, neither of which is allowed in Type II constructions. We call this a *semi-antipassive*, as the patient phrase may be realized with either core or oblique encoding:

(45) **Semi-antipassive**

The patient in this type of construction is frequently omitted and may be marked as an oblique or surface as a bare NP.

A semi-antipassive from Sama Bangingi' is shown in (46). The patient of the *aN*-marked verb may be coded as an oblique marked NP, or alternately appear as an unmarked NP. Note that coding as an unmarked NP is not otherwise found for oblique phrases in the language. A pronominal patient in the same construction must take the oblique phrase marker *ma* (Gault 1999: 56–57). A comparable example from Embaloh is provided in the supplemental materials.

(46) Sama Bangingi'

- a. *Abaya' tood aku amangan sin nangka' u.*
want INTS 1SG.ABS AV.eat OBL jackfruit that
'I really want to eat that jackfruit.' (oblique-marked patient)

- b. *Abaya' tood iya amangan nangka' inaan.*
 want INTS 3SG.ABS AV.eat **jackfruit that**
 'She really wants to eat that jackfruit.' (Gault 1999: 29, 78) (bare NP patient)

Unlike Type II, Type III constructions crucially allow oblique-marking of the patient phrase. The patient is also frequently omitted, and an overt patient is never obligatory. It is clear that Type III constructions are approaching the cross-linguistic criteria for antipassives. However, it is also permissible for the patient phrase to be realized as a bare NP, i.e. with coding used for core arguments. The degree of frequency with which bare NP patients are observed is not always reported. In Sama Bangingi', bare NP patients occur in approximately one-third of semi-antipassive clauses in texts (Gault 1999: 59).

With respect to verbal morphology, the form used for semi-antipassives is consistently shared with monovalent intransitives. Compared to corresponding transitive constructions, in Embaloh the semi-antipassive shows additional marking, as PV is zero-marked, while in Yakan and Sama Bangingi', the pattern is similar to that in Zone A languages (see 4.1.2) with equal and non-overlapping marking for semi-antipassive and transitive constructions, though this depends in part on modal category.

The functional properties of Type III constructions are quite consistent with those commonly associated with antipassives cross-linguistically. In Sama Bangingi', the agent is higher in topicality than the patient, which is often indefinite, non-referential or non-given (Gault 1999). The semi-antipassive is also used to express partitive or incomplete action in Sama Bangingi'. In Embaloh, the semi-antipassive tends to be used with less individuated patients and to express lower affectedness (Adelaar 1995). A comparison with Type I and II constructions is given in (51).

	Type I Spurious antipassive	Type II Functional antipassive	Type III Semi-antipassive
a. Can the patient be definite and/or specific?	Yes	No	(varies)
(47) b. Is the patient marked by a peripheral case or adposition?	No	No (bare NP)	Yes
c. Can the patient be freely omitted without a given context?	No	No	Yes
d. Does the construction show morphological cues of detransitivization or valency reduction?	No	(varies)	(varies)

As shown in (48), Type III construction occurs in Zones B and C—specifically in Western Indonesian languages spoken in Mindanao (Yakan and Sama Bangingi) and Embaloh, an inland West Kalimantan (Borneo) language of the South Sulawesi subgroup. Thus, the construction spans at least two primary branches of Malayo-Polynesian: Western Indonesian and South Sulawesi. We return to the implications of this distribution in Section 5.

(48) Distribution of Type III constructions



5.4 Type IV: True antipassive

Only three of the 53 languages surveyed exhibit a productive construction that may be classified as a true antipassive: Chamorro and two South Sulawesi languages: Bugis and Seko Padang. In these constructions, the verb bears some additional morphological marking, and the patient is optionally expressed and downgraded to an oblique phrase, or is suppressed. In some cases, it is also permissible for the semantic patient to be expressed as an incorporated noun. These constructions therefore exhibit key structural properties characteristic of antipassives. We classify them as Type IV, defined by the following traits:

(49) **True antipassive**

The patient phrase in this type of construction is optional or suppressed; when present, it is marked as oblique or incorporated into the verb.

Consider (50) below from Chamorro, an isolated language spoken of the Marianas. As seen in (50b), the construction bears distinct morphological marking (prefix *man-*) not present in the unmarked transitive construction (50a); furthermore, it features an oblique-marked patient phrase that can be freely omitted (Chung 1998, 2025).

(50) Chamorro

- a. *Ha bisita si dolores si antonio.*
AGR **visit** UNM D. UNM A.
'Dolores visited Antonio.' (basic transitive)
- b. *Man-bisita si dolores (as antonio).*
AGR.ANTIP-VISIT UNM D. (OBL A.)
'Dolores visited (Antonio).' Chung (2013: 6) (antipassive; implicit patient allowed)

Compared to Type I constructions, the Chamorro *maN*-marked construction also shows more functional properties associated with antipassives. In terms of textual frequency, according to Cooreman (1987), just 7.7% of the transitive verbs in Chamorro narratives are marked antipassive. Most antipassive clauses (61.4%) also have an implicit semantic patient—not syntactically realized at all, and understood as a non-specific indefinite referent. When the semantic patient is syntactically realized, it is almost always indefinite. Accordingly, the antipassive is used when the activity described by the predicate is foregrounded and the identity of the patient is unimportant.

Bugis exhibits a similar Type IV construction. When the verb is marked with *maC*-, the patient phrase is oblique-marked, incorporated into the verb, or omitted.⁸ This construction also expresses lower affectedness of the patient (Laskowske 2016: 65), as reflected in the translation for (51b).

(51) Bugis

- a. *Na=sémpe'=i Saénal asu-é.*
3SG.ERG=kick=3SG.ABS S. dog=DEF
'Saenal kicked the dog' (basic transitive)
- b. *Mas-sémpe'=i Saénal lao ri asu-é.*
ANTIP-kick=3SG.ABS S. ALL OBL dog=DEF
'Saenal kicked at the dog (but didn't necessarily hit it.)' (antipassive, oblique patient)
(Laskowske 2016: 56–57)

The Type IV construction is distinct from basic transitives in Bugis, which are zero-marked and require an obligatory patient NP and/or a pronominal enclitic indexing the patient (51a). In contrast, the *maC*-marked antipassive allows the patient to be omitted (52a) or optionally expressed as an incorporated noun immediately following the verb and preceding the pronominal enclitic indexing the agent (52b).

(52) Bugis

- a. *Mar-oki=ka'.*
ANTIP-write=1SG.ABS
'I'm writing.' (antipassive, patient omitted)
- b. *Mar-oki sure'=ka'.*
ANTIP-write letter=1SG.ABS
'I'm writing a letter' or 'I'm letter-writing.' (Laskowske 2016: 58–59) (antipassive, incorporated patient)

⁸Laskowske (2016) treats phrases headed by *lao ri* as oblique prepositional phrases, though we note that *lao*, glossed here as ALL derives from the verb 'go', while *ri* is a preposition marking oblique relations (Hanson 2003: 93).

A Type II construction marked with *m-* is also attested in Bugis. In Type II constructions, the patient is obligatorily expressed as a bare NP, following the verb and the agent enclitic. Type II clauses are interpreted as telic, while Type IV clauses are interpreted as atelic (see Section 6.1.2 for further discussion of the forms of these prefixes).

(53) Bugis

- a. *M-elli=ka'* *balé*
AV-buy=1SG.ABS fish
 'I bought a/some fish.' (Type II functional antipassive)
- b. *Mang-elli balé=ka'*
ANTIP-buy fish=1SG.ABS
 'I'm (in the process of) buying fish.' or 'I buy fish (for a living).' (Laskowske 2016: 65) (Type IV true antipassive)

The structural characteristics of the Type IV *maC*-marked construction in Bugis are thus consistent with that of a true antipassive. The patient is downgraded; it is optionally expressed, and if present must be coded as an oblique (or realized as an incorporated noun). Morphologically, the construction is more marked than a basic transitive. Furthermore, its functional properties are consistent with an antipassive. Events expressed are interpreted as atelic, or with low affectedness of the patient, and often exhibit non-specific and non-referential patients.

In the Seko Padang Type IV construction, the patient is suppressed when an intransitive prefix *miN-/mu-/m-* is affixed onto a "notionally" transitive verb stem (Payne & Laskowske 1997). It may not be indexed on the verb as a clitic pronoun, nor expressed as a full NP.

(54) Seko Padang

- a. *u=ku=ula'*
 2=1SG=follow
 'I follow you.' (basic transitive)
- b. *ku=m-ing-ula'*
 1SG=ANTIP-follow
 'I follow.' (Payne & Laskowske 1997: 432–433) (Type IV antipassive)

Seko Padang also exhibits a Type II construction marked with *maN-*, that is used with new, non-specific patients, and patients that are not major participants in the discourse (Payne & Laskowske 1997). The antipassive marked with *miN-/mu-/m-*, in comparison, is used when the patient shows even lower topicality; Payne & Laskowske call this construction 'super antipassive'. However, it is also quite rare in discourse, so its functions are not fully understood.

All Type IV constructions in our survey are reported to be only partially productive. In Chamorro, only around 40 transitive verbs have antipassive counterparts (Chung 1998: 39), and the Bugis construction likewise exhibits limited productivity and is highly lexicalized. This provides further evidence that Type IV constructions are innovative and remain under development. A comparison of the four types of AV constructions discussed above is presented in 55. See Kaufman (2017) for a classification along similar lines.

(55) Key traits of Austronesian Type I–IV constructions

	Type I Spurious antipassive	Type II Functional antipassive	Type III Semi-antipassive	Type IV True antipassive
a. Can the patient be definite and/or specific?	Yes	No	(varies)	Yes
b. Is the patient marked by a peripheral case or adposition?	No	No (bare NP)	Yes	Yes
c. Can the patient be freely omitted without a given context?	No	No	Yes	Yes
d. Does the construction show morphological cues of detransitivization or valency reduction?	No	(varies)	(varies)	(varies)

In addition to the three languages discussed above (Chamorro, Bugis, and Seko Padang), Type IV constructions are found in two Sumatran languages, however these are not synchronically productive (see Section 6.3). Thus, Type IV is found in Zone C, Zone D, and the Marianas (56).

(56) Type IV constructions



The patterns discussed above highlight the hitherto unnoticed fact that the western Austronesian AV constructions exhibit a gradient in the presence or absence of antipassive traits. This gradient shows

6.1 The development of antipassive-like constructions in western Austronesia

6.1.1 The diachronic source of the cline and directionality of the change

Comparative evidence indicates that Type I constructions (Philippine-type Actor Voice) most closely reflect the diachronic source of the cline, as supported by both morphological evidence and the distribution of the four subtypes

Actor Voice morphology <um> is widely reconstructed for Proto-Austronesian (Blust 2001, 2013; Blust & Trussel ongoing; Ross 2002, 2009; see Section 5). Its reflexes—including <m>, *m-*, *N-*, *ng-*, *n-*, *meN-*, and zero marking—are widely attested across western Austronesian languages and may combine with reflexes of the perfective <in> (Ross 2015). In addition, innovative AV affixes *maN- and *maR- are reconstructable for Proto-Malayo-Polynesian (Ross 2002; Liao 2011; Blust 2013)⁹

Despite formal variation, AV morphology is typically characterized by a nasal element (often schematized as *M-*). The morphological marking of Type II–IV constructions in languages that exhibit them is clearly cognate with this inherited AV morphology.

As shown in Section 5 Type I constructions are far more widely distributed, occurring across all primary branches of Proto-Austronesian, whereas Types II–IV appear only sporadically in certain Malayo-Polynesian languages and lower-level subgroups. This distribution suggests that antipassive-like constructions developed from changes in the properties and distribution of Type I AV constructions in a subset of western Austronesian languages.

Further evidence that Type I represents the diachronic source of the antipassive-like cline comes from the cross-linguistic generalization that main clauses tend to be innovative, while subordinate clauses are more conservative (Bybee 2001 et seq.). Some languages in our sample exhibit both Type I and II constructions. In several of these—including Duri, Makasar, and Bugis—Type I is restricted to contexts where it is obligatory, notably subordinate clauses with A–S/A coreference (59a) and focus constructions with contrastive A (59b), while Type II has a much broader distribution. Since subordinate clauses are known to preserve conservative morphology in western Austronesian languages (Donohue 1999; Chen 2017), these patterns support the view that Type I is conservative, whereas Types II–IV are innovative. We therefore analyze these cases as remnants of an earlier Type I AV construction with a broader distribution, which in most Zone A–C languages still occurs not only in these environments but also in main clauses and pragmatically neutral contexts.

(59) Duri

- a. *ma-rio gaja-m=i Yuhani ng-kita=i*
STV-rejoice very-COMPL=3 Y. AV-see=3
'Juhani became very glad to see it.' (Type I, subordinate clause)
- b. *baq=i mai tuu nande na*
carry-3 here DEM rice and
akuq m-baq=i lako
1SG AV-carry=3 there
'Carry that rice here and I will carry it there.' (Valkama 1993: 82, 85) (Type I, contrastive focus)

The distribution of the Seko Padang Type II and Embaloh and Sama Bangingi' Type III constructions is likewise conditioned by structural factors in addition to semantic and pragmatic ones. These

⁹See Appendix I for language-specific sources.

constructions also occur obligatorily in subordinate clauses with A-S/A coreference, even when the patient does not display reduced topicality, affectedness, or individuation, as it usually does in main clauses (Adelaar 1995: 392; Gault 1999: 78–79; Payne & Laskowske 1997: 432). This pattern supports the view that Types II and III derive from a Type I source, with which they share key structural and semantic properties in subordinate contexts.

Based on this morphological and distributional evidence, we conclude that the cline of antipassive-like constructions (Types II–IV) derives from earlier Philippine-type AV constructions (Type I). As discussed in Sections 4 and 5, Type I constructions (thus the source of the cline) exhibit key properties of true transitives—despite often having been analyzed as antipassives.

6.1.2 The development of antipassive marking in western Austronesian languages

Another key finding from our survey is the emergence of distinctive morphological marking for antipassives and intermediate constructions. As reported in 55, some but not all Type II–IV constructions have developed innovative verbal morphology not found on monovalent intransitives that may be viewed as morphological cues of detransitivization.

Such affixes are typically similar in shape but formally distinct from morphology used in the same languages on bivalent AV or monovalent intransitive clauses, which suggests that they are being reanalyzed or grammaticalized as specific markers of valency reduction. These languages thus differ from Philippine-type Austronesian languages, and indeed the majority of languages showing Type I constructions, which make no morphological distinction between bivalent and monovalent AV clauses.

For example, in Makasar, monovalent verbs are usually bare, or marked with *aC-*. Meanwhile Type II (functional antipassive) verbs carry the prefix *aN(N)-*, while Type I verbs (in subordinate clauses and contrastive focus constructions) exhibit a distinct marker *aN-*. The Type II prefix triggers nasal substitution of an initial stem consonant when it is a voiceless stop or /b/, resulting in a geminate nasal at the morpheme boundary, while the other two do not, as in 60. Thus, Makasar is developing a dedicated morphological marker for its functional antipassive construction.

(60) Makasar

- a. *Akkanama'*
aC-kana=mo=a'
 INTR-WORD=PFV=1
 'I speak.' (Monovalent intransitive)
- b. *Ammallia' ballo'*
aN(N)-balli=a' ballo'
 AV₂-buy=1 palm.wine
 'I buy palm wine.' (Type II, marked with *aN(N)-*)
- c. *Kongkonga ambunoi mionga*
kongkong=a aN-buno=i miong=a
 dog=DEF AV₁-kill=3 cat=DEF
 'The dog killed the cat.' (Jukes 2020: 243, 335, 384) (Type I, marked with *aN-*)

The table below lists surveyed languages with AV constructions beyond Type I. Markers shown for Types II–IV are all likely cognate with Proto-Austronesian AV marking. Even so, in languages with more than one attested construction, a tendency for differentiation of verbal morphology across them is observed. Thus, antipassive and antipassive-like constructions in these languages tend to develop

distinct markers, distinguishing them from bivalent or transitive clause types. Additional examples appear in the supplemental materials.

(61) Antipassive-like constructions in selected languages

Language	Type I	Type II	Type III	Type IV	Other
Duri	✓ <i>N-</i>	✓ <i>N-</i>	-	-	
Makasar	✓ <i>aN-</i>	✓ <i>aN(N)-</i>	-	-	
Ampenan Sasak	✓ \emptyset	✓ <i>N-</i>	-	-	
Old Enggano	✓ <i>bu-</i>	-	-	✓ <i>aH-</i>	
Chamorro	✓ \emptyset	-	-	✓ <i>maN-/fan-</i>	
Nasal	✓ <i>N-</i>	-	-	✓* <i></i>	
Mandar	-	✓ <i>maC-</i>	-	-	
Mori Bawah	-	✓ <i>poN-</i>	-	-	
Embaloh	-	-	✓ <i>maN-</i>	-	
Sama Bangingi'	-	-	✓ <i>aN-/mag-</i>	-	
Yakan	-	-	✓ <i>aN-/mag-</i>	-	
Bugis	✓ <i>m-</i>	✓ <i>m-</i>	-	✓ <i>maC-</i>	
Seko Padang	-	✓ <i>maN-</i>	-	✓ <i>miN-/<um></i>	
Muna	-	-	-	-	DOI <i>ae-</i> (SBJ PFX)

*Marginal construction, low productivity

6.2 The driving force for development of antipassive(-like) constructions

We now consider the potential driving forces behind the development of Type II–IV constructions. Cross-linguistically, antipassive markers derive from a variety of diachronic sources that share a common semantic profile: increased agent salience and reduced patient salience. Sansó (2019) identifies several such sources, all of which privilege agentivity and/or attenuate the role of the patient:

(62) Four diachronic sources of antipassive markers

- a. agent nominalizations
- b. generic or indefinite object fillers (e.g. *person*, *(some)thing*)
- c. action nominalizations, optionally with a light verb
- d. reflexive and/or reciprocal morphology

We propose that the antipassive(-like) constructions discussed here (Types II–IV) emerge under comparable pressures. Type I constructions typically involve a highly topical agent and a relatively low-topicality patient, a discourse configuration that favors lower semantic transitivity in the sense of Hopper & Thompson (1980) including reduced affectedness and individuation of the patient and a tendency toward non-punctual or atelic interpretations.

Substantial evidence indicates that discourse prominence drives this pattern. A long line of work analyzes Philippine-type AV clauses as subject–topic constructions in which the pivot corresponds to the discourse-prominent argument (Shibatani 1998; Richards 2000; Chen 2025). This idea traces back to Keenan (1976), who notes that pivots in Malagasy display unusually high referential prominence, and it is supported by numerous descriptive and comparative studies (Foley 1984; Carrier 1985; Naylor 1995; Paul 2021; inter alia). In many languages, voice selection is sensitive to the relative discourse prominence of agent and patient (e.g. Tsou: Huang 2002; Jakarta Indonesian: Wouk 1996).

Latrouite's (2011: 102, 109) generalization for Tagalog captures this interaction succinctly: pivot marking *ang* targets the most discourse-prominent argument, defined by factors such as specificity,

information structure, or person hierarchy. Elicited dialogue further supports this view: across voice types, pivohood tracks discourse topicality rather than grammatical role (Chen 2017).

A key implication is that in AV clauses the agent is typically the discourse topic, while the patient is correspondingly low in topicality. This configuration explains why AV clauses may exhibit antipassive-like functional properties despite retaining a core patient argument, as noted for Tagalog and Kelabit by Hemmings (2017) (see also 4.2.3).

Additional support comes from languages that exhibit both Type I and Type II constructions, in which the alternation is clearly discourse-driven. In Duri, the Type II functional antipassive construction is used when the agent is highly topical and the patient is low in topicality and indefinite, whereas the Type I transitive AV construction is associated with highly topical, definite patients (Valkama 1993):

(63) Topicality and voice in Duri

Topicality of agent	Topicality of patient	Voice morphology	Construction
High	Low	<i>N-</i>	Functional antipassive
High	High/Med	∅	Transitive PV
High/Med	High	<i>N-</i>	Transitive AV
Low	High	<i>di-</i>	Passive

In Duri, this discourse-driven contrast has been grammaticalized: Type II constructions impose strict constraints on low-topicality patients (an indefiniteness requirement, lack of pronominal indexing, rigid post-verbal position), while Type I remnants allow greater syntactic flexibility. Similar patterns are reported for other South Sulawesi and Celebic languages (e.g. Makasar, Mori Bawah), as well as Sasak, indicating a broader grammaticalization of discourse-conditioned patient prominence.

Finally, Type III constructions likewise show strong discourse conditioning. As discussed in Section 5.3, patients in Type III constructions in Sama Bangingi' and Embaloh are typically indefinite, non-topical, and associated with unrealized or low-salience events (Gault 1999, Adelaar 1995).

These patterns indicate that western Austronesian antipassives arise from the grammaticalization of discourse asymmetries in AV constructions rather than from valency reduction.

6.3 The derivational pathway: Single innovation or parallel drifts?

Do the intermediate constructions and true antipassives reflect a single innovation or multiple parallel developments (i.e. drift)? Although Types II–IV constructions occur in only a minority of the sample (11/53 languages), their wide geographic and genetic distribution suggests drift. While especially common in Sulawesi, they also appear sporadically across lower-level subgroups: Type II occurs in diverse groups such as Sasak (Western Indonesian), South Sulawesi, and Celebic languages. Type III is attested in languages such as Embaloh (Borneo, South Sulawesi subgroup), and Yakan and Sama Bangingi' (southern Philippines, Western Indonesian subgroup). Type IV spans distant regions from South Sulawesi to the Marianas.

Further support comes from two Sumatran subgroup languages (Billings & McDonnell 2024). In Nasal, a marginal antipassive marked with occurs with a limited set of verbal roots (McDonnell p.c.). In Enggano, older sources describe an antipassive marked with *aH-*, where the patient is marked with the oblique *u-* and optionally preceded by the preposition *i'ioo* (Hemmings under review). In Contemporary Enggano, however, the patient appears as a bare NP and use of the preposition is no longer possible; the construction is therefore no longer a true antipassive and is classified here as Type I.

Although the Nasal construction is marginal and the Enggano pattern has changed over time, their presence nonetheless supports the view that antipassives have arisen sporadically across western Austronesian languages rather than through a single subgroup innovation.

7 The changing faces of Austronesian voice: Theoretical and typological implications

We have shown that genuine antipassives are rare in western Austronesian when established typological criteria are applied consistently to AV constructions. This finding has two major implications, summarized in (64). The first concerns the alignment status of Philippine-type languages, while the second bears on the diachronic development of western Austronesian symmetrical voice systems.

- (64) a. **The alignment of Philippine-type Austronesian languages:** What does the transitive status of Type I AV imply for traditional ergative analyses of Philippine-type languages?
 b. **The evolutionary trajectory of western Austronesian symmetrical voice systems:** What does the cline of AV-marked antipassive(-like) constructions reveal about the diachrony of symmetrical voice?

7.1 Implications for the case alignment of Philippine-type Austronesian languages

We have shown that the arguments commonly analyzed as antipassive patients in Zone A languages exhibit the hallmarks of core arguments. This finding bears directly on a longstanding debate in the literature concerning whether Philippine-type languages are best characterized as ergative, accusative, or as instantiating a distinct alignment system.

Central to this debate is the transitivity status of the Philippine-type Actor Voice (AV) construction, which, together with the other voice forms, constitutes the Philippine-type voice system. These voice forms are associated with the selection of different pivots—agent, patient, locative, or instrument/benefactive—as illustrated in (65).

- (65) Philippine-type voice alternation in Tagalog
- a. *B⟨um⟩ili si Aj ng keyk mula kay Lia para kay Joy.*
 buy⟨AV⟩ PN.PIVOT AJ INDF.CM₂ cake P₁ PN.CM₂ L. P₂ PN.CM₁ J.
 ‘Aj bought cake from Lia for Joy.’ (Actor Voice)
- b. *Bi-bilih-in ni Aj ang keyk mula kay Lia para kay Joy.*
 CONT-buy-PV PN.CM₂ AJ CN.PIVOT cake P₁ PN.CM₂ L. P₂ PN.CM₁ J.
 ‘Aj will buy the cake from Lia for Joy.’ (Patient Voice)
- c. *Bi-bilih-an ni Aj ng keyk si Lia para kay Joy.*
 CONT-buy-LV PN.CM₂ AJ INDF.CM₂ cake PN.PIVOT Lia P₂ PN.CM₁ J.
 ‘Aj will buy cake from Lia for Joy.’ (Locative Voice)
- d. *I-bi-bili ni Aj ng keyk mula kay Lia si Joy.*
 CV-CONT-buy PN.CM₂ AJ INDF.CM₂ cake P₁ PN.CM₁ Lia PN.PIVOT J.
 ‘Aj will buy cake from Lia for Joy.’ (primary data) (Circumstantial Voice)

The schematized case pattern is given in (66).

(66) Philippine-type alignment: schematized case pattern¹⁰

	a. AV	b. PV	c. LV	d. CV
agent	Pivot	CM ₂	CM ₂	CM ₂
patient	CM ₁	Pivot	CM ₁	CM ₁
locative	P ₁	P ₁	Pivot	P ₁
instrument/beneficiary	P ₂	P ₂	P ₂	Pivot

The ergative view of this pattern maintains that the AV construction is syntactically intransitive, or antipassive, and that its patient is an oblique argument (see, e.g., Payne 1982; Mithun 1994; Aldridge 2004). Under this view, the alignment pattern is as represented in (67).

(67) The ergative view of Philippine-type languages

	a. AV	b. PV	c. LV	d. CV
agent	Pivot: ABS	CM ₂ : ERG	CM ₂ : ERG	CM ₂ : ERG
patient	CM ₁ : OBL	Pivot: ABS	CM ₁ : OBL	CM ₁ : OBL
locative	P ₁	P ₁	Pivot: ABS	P ₁
instrument/benefactor	P ₂	P ₂	P ₂	Pivot: ABS
	intransitive / antipassive	basic transitive	transitive applicative	transitive applicative

However, given our conclusion that Type I constructions are syntactically transitive and that their patients exhibit core argument properties, the apparent ergative alignment is only superficial. The pivot of an AV clause is a transitive agent (A) rather than an intransitive subject (S), as demonstrated by the contrast in (68). The relevant two-place pattern is therefore as in (69), where both the AV and PV constructions are transitive.

(68) Tagalog

- a. *h<um>abol si aya kay lia.*
 chase<AV> PN.PIVOT A. PN.CM₁ L.
 ‘Aya chased Lia.’ (AV; alleged antipassive)
- b. *h<in>abol ni aya si lia.*
 chase<PV.PRF> PN.CM₂ A. PN.PIVOT L.
 ‘Aya chased Lia.’ (PV; alleged basic transitive)
- c. *d<um>ating si aya.*
 <AV>arrive PN.PIVOT A.
 ‘Aya arrived.’ (primary data) (Actor Voice; monovalent)

(69) Argument-marking pattern in Tagalog’s two-place AV and PV constructions (68a, b)

	Actor Voice (syntactically transitive)	Patient Voice (syntactically transitive)
agent	<i>si</i> (A)	<i>ni</i> (A)
patient	<i>kay</i> (P)	<i>si</i> (P)

¹⁰Philippine-type languages typically use a dedicated preposition for locative adjuncts, motivating the distinction between P₁ and P₂. In some languages, P₂ has multiple forms distinguishing non-locative adjunct types.

Our finding that AV constructions in Philippine-type languages exhibit the structural properties of transitive, rather than antipassive, clauses supports non-ergative analyses of Philippine-type alignment and reinforces the view that western Austronesian languages do not constitute a hotspot for antipassives.

More broadly, together with critiques of derived-applicative analyses of LV and CV constructions (Foley 2008; Chen 2017; *inter alia*), our findings suggest that Philippine-type voice alternations affect pivot selection rather than clausal transitivity. A key implication is that pivot marking should not be analyzed as a subject marker (i.e. nominative or absolutive), since it may target different participants—including non-core roles such as instruments and beneficiaries—without any accompanying change in argument structure. Instead, our findings are consistent with analyses that treat pivot marking as a form of topic marking (Shibatani 1998; Pearson 2005; Chen 2017; *a.o.*).

This conclusion also bears on a broader typological issue discussed by Haspelmath (2011), who argues that the identification of S, A, and P arguments depends crucially on how these notions are defined. As he shows, conflicting analyses of passive and antipassive constructions often arise from inconsistencies in argument identification rather than from empirical disagreement. Our findings contribute to this debate by showing that arguments commonly analyzed as antipassive patients in Philippine-type languages display specific properties shared by other core arguments (S, A, P) in these languages, and on this basis they can be considered to constitute core P arguments.

7.2 The evolutionary trajectory of Actor Voice: from symmetrical voice to valency-rearranging morphology

A second key implication of the observed typology concerns the evolutionary trajectory linking western Austronesian symmetrical voice systems to the asymmetrical voice systems characteristic of Indo-European languages and many other language families.

The predominance of Type I and Type II AV constructions indicates that western Austronesian voice systems are primarily organized around valency-neutral symmetrical alternations rather than valency-decreasing operations. In this view, voice alternations serve chiefly to encode information-structural prominence through pivot selection, not to alter clausal transitivity or argument structure, in line with Kiss (1995: 4):

- (70) In a topic-prominent language, the topic is, in a way, an alternative to the subject [in a subject-prominent language].

This perspective also accords with analyses treating pivot phrases in Philippine-type languages (Zone A) as topics rather than subjects, with symmetrical voice alternations indexing discourse prominence (e.g. Shibatani 1998; Richards 2000; Pearson 2005).¹¹ Building on this, we propose that low patient topicality drives the emergence of antipassives and intermediate antipassive-like constructions (Section 5). Diachronically, this reflects a shift from symmetrical systems tracking discourse prominence to asymmetrical systems increasingly encoding valency and transitivity.

Since antipassives are cross-linguistically less common than passives (WALS; Zúñiga & Kittilä 2019), an important question is whether the same pattern holds in western Austronesian. Available

¹¹See Appendix I for further empirical support; see also Latrouite (2011) and Chen (2017) for evidence linking pivothood with discourse topichood.

descriptions suggest that passives are indeed more widespread than true antipassives in the region.¹²

Our survey further suggests that the emergence of true antipassives often coincides with that of passives, yielding asymmetrical systems in which either agent or patient can be demoted. This pattern appears in all three languages with (synchronically productive) true antipassives (Type IV)—Chamorro, Bugis, and Seko Padang—which also show morphologically marked passives with oblique or suppressed agents. Passives are likewise reported in most languages with Type II or III constructions.

Languages with both a passive and an antipassive instantiate highly productive asymmetrical voice systems and differ typologically from prototypical Philippine-type systems, which primarily rely on valency-neutral voice alternation. Chamorro illustrates such a system: the basic transitive is unmarked, the antipassive is marked with *man-* and allows an optional oblique patient, and the passive is marked with *<in>* and features an oblique agent (Chung 1998, 2025):

(71) Chamorro

- a. *Ha **bisita** si dolores si antonio.*
 AGR **visit** UNM dolores UNM antonio
 ‘Dolores visited Antonio.’ (basic transitive)
- b. ***Man-bisita** si dolores (as antonio).*
 AGR.ANTIP-visit UNM Dolores (OBL Antonio)
 ‘Dolores visited (Antonio).’ (antipassive; implicit patient allowed)
- c. ***B-<in>isita** si Antonio (gi)as Dolores.*
 AGR.PASS.visit UNM Antonio OBL Dolores
 Antonio was visited by Dolores.’ (Chung 2013: 6) (passive)

Importantly, clear morphological evidence shows that Chamorro’s antipassive and passive affixes historically derive from AV and PV morphology (Donohue and Machlachlan 1999), illustrating a pathway from symmetrical voice to valency-changing morphology.

(72) The evolution of symmetrical voice morphology in Chamorro

- a. **Philippine-type Actor Voice affix** → antipassive marker
 b. **Philippine-type Patient Voice affix** → passive marker

Taken together, these patterns highlight that western Austronesian languages exhibit two distinct voice systems—symmetrical and asymmetrical—with evidence of a diachronic link between them: symmetrical systems may develop into asymmetrical ones through the reanalysis of voice morphology as valency-decreasing affixes. The same direction of development is also observed in eastern Austronesian languages (e.g., Næss 2013, 2025; Holmen & Næss 2025).

8 Conclusion

The widespread view of western Austronesian as a hotspot for antipassives and ergative–absolute alignment is not supported by comparative evidence. Our survey of 53 languages reveals that genuine

¹²At least 12 languages in our sample are reported to have genuine passives that demote or suppress the agent: Puyuma (Chen 2022), Acehese (Legate 2014), Indonesian (Legate 2014), Bugis (Hanson 2003), Makasar (Jukes 2020), Mori Bawah (Mead 1999; 2005), Sasak (Khairunnisa 2022; Duri (Valkama 1993)), Mandar (Brodtkin 2022), Chamorro (Chung 2020), Seko Padang (Payne & Laskowske 1997), and Tukang Besi (Donohue 1999).

antipassives are rare, being robustly attested in only four languages, with one additional marginal case in Nasal.

Although Actor Voice constructions often exhibit functions associated with antipassives, most remain syntactically transitive. We proposed a four-way typology of AV and related constructions, forming a cline of antipassive-like patterns shaped by discourse factors—especially low patient topicality—that in some languages have developed into true antipassives.

These findings have two broader implications. First, ergative analyses of Philippine-type and other western Austronesian symmetrical voice systems are difficult to maintain insofar as they depend on treating Actor Voice as intransitive or antipassive. Second, antipassive-like constructions appear to reflect independent diachronic developments driven by shared discourse pressures rather than a family-wide alignment pattern. More broadly, the Austronesian case underscores the need for caution in applying broad typological labels and highlights the value of fine-grained classifications grounded in systematic diagnostics.

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Supplemental materials

List of abbreviations not included in the Leipzig Glossing Rules

AGT	agentive
AOR	aorist
ASP	aspect
ASSOC	associative
AV	actor voice
CM	case marker
CN	common noun
CONT	contemplated aspect
CORE	core argument
CV	circumstantial voice
EMPH	emphatic
INTS	intensive
LK	linker
LV	locative voice
NFUT	non-future
NPIVOT	nonpivot
PART	partitive
PFX	prefix
PIVOT	pivot
PN	personal name
P	preposition
PV	patient voice
REAL	realis
RED	reduplication
UMN	unmarked case
EX.POSS	existential possessive

Western Austronesian languages examined in the paper

Language	Geographical distribution	Subgroup affiliation	Source material
Atayal	Taiwan	Atayalic	D. Lin 2011
Seediq	Taiwan	Atayalic	Holmer 1996
Bunun	Taiwan	Bunun	De Busser 2009
Amis	Taiwan	East Formosan	Wu 2006, 2007
Kavalan	Taiwan	East Formosan	Liao 2004, Li & Tsuchida 2006
Siraya	Taiwan	East Formosan	Adelaar 2011
Paiwan	Taiwan	Paiwan	Baker 1988
Puyuma	Taiwan	Puyuma	Teng 2008
Tsouic	Taiwan	Tsouic	G. Lin 2009
Ibatan	Batanes	Malayo-Polynesian, Batanic	Maree 2007
Blaan	Mindanao	Malayo-Polynesian, Bilic	Bondoc 2015
Botolan Sambal	Luzon	Malayo-Polynesian, Central Luzon	Antworth 1979
Tagalog	official language of the Philippines	Malayo-Polynesian, Greater Central Philippines	Kroeger 1993, Schachter & Otanes 1972
Cebuano	Luzon	Malayo-Polynesian, Greater Central Philippines	Katagiri 2005
W. Subanon	Mindanao	Malayo-Polynesian, Greater Central Philippines	Estioca 2020
Tawbuid	Mindoro	Malayo-Polynesian, Greater Central Philippines	Fleming 2022
Hiligaynon	Visayas	Malayo-Polynesian, Greater Central Philippines	Mithun 2019, Craaybeek 2025
Arta	Luzon	Malayo-Polynesian, Northern Luzon	Kimoto 2017
Ilocano	Luzon	Malayo-Polynesian, Northern Luzon	Rubino 1997
Tondano	Sulawesi	Malayo-Polynesian, Minahasan	Brickell 2014
Chamorro	Guam, northern Mariana islands	Malayo-Polynesian, Chamorro	Chung 2020, 2025
Balantak	Sulawesi	Malayo-Polynesian, Celebic	van den Berg & Busenitz 2012
Mori Bawah	Sulawesi	Malayo-Polynesian, Celebic	Mead 1999, 2005
Muna	Sulawesi	Malayo-Polynesian, Celebic	van den Berg 1995, 2013
Tukang Besi	Sulawesi	Malayo-Polynesian, Celebic	Donohue 1999, 2002
Embaloh	Borneo	Malayo-Polynesian, South Sulawesi	Adelaar 1995
Bugis	Sulawesi	Malayo-Polynesian, South Sulawesi	Laskowske 2016, Hanson 2003
Duri	Sulawesi	Malayo-Polynesian, South Sulawesi	Valkama 1993
Makasar	Sulawesi	Malayo-Polynesian, South Sulawesi	Jukes 2020
Mandar	Sulawesi	Malayo-Polynesian, South Sulawesi	Lee 2008
Seko Padang	Sulawesi	Malayo-Polynesian, South Sulawesi	Payne & Laskowske 1997
Enggano	Sumatra	Malayo-Polynesian, Sumatran	Hemmings under review
Karo Batak	Sumatra	Malayo-Polynesian, Sumatran	Woollams 1996
Gayo	Sumatra	Malayo-Polynesian, Sumatran	Eades 2005
Nasal	Sumatra	Malayo-Polynesian, Sumatran	McDonnell, p.c.
Indonesian	official language of Indonesia	Malayo-Polynesian, Western Indonesian	Arka & Manning 2008
Begak (Ida'an)	Borneo	Malayo-Polynesian, Western Indonesian	Goudswaard 2005
Kelabit	Borneo	Malayo-Polynesian, Western Indonesian	Hemmings 2021
Lun Bawang	Borneo	Malayo-Polynesian, Western Indonesian	Mortensen 2021
Matéq	Borneo	Malayo-Polynesian, Western Indonesian	Connell 2013
Mualang	Borneo	Malayo-Polynesian, Western Indonesian	Tjia 2007
Paku	Borneo	Malayo-Polynesian, Western Indonesian	Diedrich 2018
Javanese	Java	Malayo-Polynesian, Western Indonesian	Oglobin 2005, Ewing 1999
Sundanese	Java	Malayo-Polynesian, Western Indonesian	Kurniawan 2013
Madurese	Java, Madura	Malayo-Polynesian, Western Indonesian	Davies 2005, 2010
Balinese	Lesser Sundas	Malayo-Polynesian, Western Indonesian	Arka 2003
Sasak	Lesser Sundas	Malayo-Polynesian, Western Indonesian	Khairunnisa 2022
Malagasy	Madagascar	Malayo-Polynesian, Western Indonesian	Paul & deMena Travis 2006
Sama Bangingi'	Mindanao	Malayo-Polynesian, Western Indonesian	Gault 1999, 2001
Southern Sinama	Mindanao	Malayo-Polynesian, Western Indonesian	Rajik & Tarusan 2023
Yakan	Mindanao	Malayo-Polynesian, Western Indonesian	Brainard & Behrens 2002
Acehnese	Sumatra	Malayo-Polynesian, Western Indonesian	Durie 1985, Patrianto p.c.
Besemah	Sumatra	Malayo-Polynesian, Western Indonesian	McDonnell 2016

Additional data and examples

- (1) Tagalog, shared case marking for patient in AV, LV, and CV
- a. *B(um)ili si Aj ng keyk mula kay Lia para kay Joy.*
 buy<AV> PN.PIVOT AJ INDF.CM₁ cake P₁ PN.CM₂ L. P₂ PN.CM₂ J.
 ‘Aj bought cake from Lia for Joy.’ (Actor Voice)
- b. *Bi-bilih-an ni Aj ng keyk si Lia para kay Joy.*
 CONT-buy-LV PN.CM₂ AJ INDF.CM₁ cake PN.PIVOT L. P₂ PN.CM₂ J.
 ‘Aj will buy cake from Lia for Joy.’ (Locative Voice)
- c. *I-bi-bili ni Aj ng keyk mula kay Lia si Joy.*
 CV-CONT-buy PN.CM₂ AJ INDF.CM₁ cake P₁ PN.CM₂ L. PN.PIVOT J.
 ‘Aj will buy cake from Lia for Joy.’ (Circumstantial Voice)
- (2) Puyuma raising-to-object construction, where the derived object shares the same case-marking (CM₁) with the alleged antipassive patient
- a. *Ma-ladram=ku [dra m-uka i Isaw i Balangaw adaman].*
 AV-know=1SG.PIVOT [C AV-go SG.PIVOT I. LOC Balangaw yesterday]
 ‘I know that Isaw went to Balangaw yesterday.’ (non-raising version)
- b. *Ma-ladram=ku kan Isaw_i [dra m-uka i Balangaw adaman].*
 AV-know=1SG.PIVOT SG.CM₁ I. [C AV-go LOC Balangaw yesterday]
 ‘I know that Isaw went to Balangaw yesterday.’ (raising of the embedded agent to the alleged antipassive patient position)
- c. *Ma-ladram=ku kan Isaw.*
 AV-know=1SG.PIVOT SG.CM₁ I,
 ‘I know Isaw.’ (Chen 2025: 20)
- (3) Cebuano: Shared verbal morphology between monovalent intransitives and the putative antipassive
- a. *Mo-adto ang tawo sa dagat.*
 AV.F-go PIVOT person to beach
 ‘The person will go to the beach.’ (monovalent intransitive)
- b. *Mo-palit ang tawo ug libro*
 AV-buy PIVOT man CM₂ book
 ‘The man will buy a book.’ (putative antipassive)
- c. *Palit-on sa tawo ang libro.*
 buy-PV CM₂ man PIVOT book
 ‘The man will buy the book.’ (Valkama 2000: 13–14, 31) (putative basic transitive)
- (4) Ampenan Sasak: Type I (zero-marked) allowing definite and indefinite patients vs. Type II (N-marked) restricted to indefinite patients.
- a. *Herjan_i wah=ne_i sòròng sampan*
 H. PFV=3 push boat
 ‘Herjan pushed a boat.’ (Type I, indefinite patient)
- b. *Dengan no sòròng=ne aku.*
 person that push=3 1SG
 ‘That person pushed me.’ (Type I, definite patient)

- c. *Dengan no ny-(s)òròng=ne sampan*
 person that AV-push=3 boat
 ‘That person pushed a boat.’ (Type II, indefinite patient)
- d. **Dengan no ny-(s)òròng=ne aku.*
 person that AV-push=3 1SG
 Intended: ‘That person pushed me.’
 (Khairunnisa 2022 p.55, 57–58)

(5) Selected Proto-Austronesian 1-place and 2-place verbs reconstructable with Actor Voice morphology **<um>*

reconstructed 1-place verbs	reconstructed 2-place verbs
* <i>q<um>ajaw</i> ‘to shine (sun)’, * <i>N<um>aŋuj</i> ‘to swim’,	* <i>k<um>aRaC</i> ‘to bite’, * <i>q<um>aNup</i> ‘to hunt’,
* <i>q<um>etut</i> ‘to fart’, * <i>q<um>aŋqaj</i> ‘to bark (dog)’,	* <i>k<um>aCu</i> ‘to carry’, * <i>k<um>ali</i> ‘to dig’,
* <i>q<um>uzaN</i> ‘to rain’, * <i>S<um>eyup</i> ‘to blow’,	* <i>d<um>ilaq</i> ‘to lick’, * <i>k<um>eRet</i> ‘to cut’,
* <i>C<um>aŋis</i> ‘to cry’, * <i>s<um>akay</i> ‘to walk’,	* <i>t<um>enun</i> ‘to weave’, * <i>g<um>aruC</i> ‘to comb’
* <i>C<um>ubuq</i> ‘to sprout, to grow’, * <i>S<um>uni</i> ‘to chirp (bird)’	* <i>s<um>usu</i> ‘to suckle’, * <i>p<um>anaq</i> ‘to shoot with a bow’

(6) Pronominal patient in Philippine-type AV constructions

a. Tagalog

Na-ka-kita ako sa’yo.
 PFV-RED-see 1SG.PIVOT 2SG.CM₁
 ‘I saw you.’

b. Amis

mi-nengneng kaku cingranan.
 AV-see 1SG.PIVOT 3SG.CM₁
 ‘I will see him.’ (Huang 2005: 788)

(7) Kelabit, AV and PV equally marked, each with two bare NP arguments

a. *Ne-nge-laak nubaq tesineh nedih .*
 PFV-AV-cook rice mother 3SG.POSS
 ‘Her mother cooked rice.’ AV, marked with *N-*

b. *L<in>aak tesineh nedih nubaq.*
 <PV.PRF>cook mother 3SG.POSS rice
 ‘Her mother cooked rice.’ (Hemmings 2016: 304) PV, marked with *<in>*

(8) Kelabit, AV patients may be definite and specific

a. *rengaq idih ngaley sineh nipa uluh nedih keleyh*
 when DEM marten DEM AV.pack head 3SG.POSS PRT
 ‘Then the yellow-throated marten put his head [into the trap].’ AV, definite patient

b. *neh nieh muwer ieh*
 DEM PRT.3SG AV.butcher 3SG
 ‘Then she butchered it [the yellow-throated marlin].’ AV, pronominal patient
 (Hemmings 2015: 19)

(9) Indonesian, floating quantifier can modify patient of AV but not an oblique

- a. *Saya mukul anak-anak itu kemarin semua-nya.*
 1SG AV.hit child-RDP DEM yesterday **all-3**
 ‘I hit *all the children* yesterday.’ (AV, with bare NP patient)
- b. * *Orang-orang Sasak datang dengan anak-anak semua-nya.*
 people-RDP Sasak come with child-RDP **all-3**
 Intended: ‘The Sasak people came with *all their children*.’ (intransitive, with
 preposition-marked oblique)
 (Hemmings 2015: 71, citing Musgrave 2002:70)

(10) Balinese, AV voice morphology shared with monovalent intransitives

- a. *Tiang numbas bawi-ne punika*
 1 AV.buy pig-DEF that
 ‘I bought the pig.’ (AV, transitive, marked with *N-*)
- b. *Bawi-ne punika tumbas tiang*
 pig-DEF that PV.buy 1
 ‘I bought the pig.’ (PV, unmarked)
- c. *Ia ng-eling*
 3 AV-cry
 ‘(S)he cried.’ (monovalent intransitive, marked with *N-*)
- d. *Ia ulung*
 3 PV.fall
 ‘(S)he fell down’ (Arka 2003: 5, 40) (monovalent intransitive, unmarked)

(11) Balinese, raising of embedded agent to the alleged antipassive patient position

Cang (jani) nyadin ia (jani) // [tusing lakar mulih buin]
 1 now AV.believe 3 now [NEG FUT go.home again]
 ‘I now believe that (s)he will not return home again’ (Arka 2003: 17)

(12) Balinese, floating quantifier can modify patient of AV

Cerik-cerik-e meli jaja-ne ibi onya
 RDP-child-DEF AV.buy cake-DEF yesterday **all**
 ‘The children bought *all of the cake*’ OR ‘*All the children* bought cake.’ (Arka 2003: 46)

(13) Sama Bangingi’, Type III with oblique pronominal patient

- a. *Anda’-ku iya.*
 PV.see-1SG.ERG 3S.ABS
 ‘I’m watching *him*.’ (PV, bare pronominal patient)
- b. *Anganda’ aku ma iya.*
 AV.see 1SG.ABS **OBL 3SG**
 ‘I am looking **at him**’ (Gault 1999: 56) (Type III, oblique pronominal patient)

- (14) Continuity (topicality) of agents and patients in Seediq and Tsou (Huang 2002: 680–681)

	Tsou				Seediq			
	Actor Voice		Patient Voice		Actor Voice		Patient Voice	
	Agent	Patient	Agent	Patient	Agent	Patient	Agent	Patient
High	62 (88.5%)	4 (5.7%)	103 (78.6%)	52 (39.7%)	105 (71%)	32 (21.6%)	69 (95.8%)	30 (41.6%)
Medium	6 (8.6%)	27 (36.5%)	16 (12.2%)	31 (23.7%)	23 (15.5%)	74 (50%)	2 (2.8%)	17 (23.6%)
Low	2 (2.9%)	39 (55.7%)	12 (9.1%)	48 (36.6%)	20 (13.5%)	42 (28.4%)	1 (1.4%)	25 (34.7%)
	70 (100%)	70 (100%)	131 (100%)	131 (100%)	148 (100%)	148 (100%)	72 (100%)	72 (100%)

- (15) Topic persistence in Cebuano AV constructions

	Agent	Patient
High importance	42 (54%)	4 (7%)
Medium importance	30 (38%)	6 (14%)
Low importance	6 (8%)	46 (79%)
	100%	100%

- (16) Mori Bawah, functional antipassive with partitive event

Onae=mo ka=i pon-tena i Numunuo otolu-'ira mia mota'u.
 3SG-PFV and-3SG ANTIP-order PN N. **three-3PL person old**

'Then Numunuo sent out three of the old people.' (Mead 1999: 128)

- (17) Bugis, Antipassive patient phrase is omissible

- a. *U=baca-i bo'=e.*
 1SG.ERG=read=3SG.ABS book=DEF
 'I read the book.' (basic transitive, obligatory patient)
- b. *Mab-baca=ka'.*
 ANTIP-read-1SG.ABS
 'I'm reading.' (Laskowske 2016: 20, 58) (Type IV, patient omissible)

- (18) Seko Padang, Patient suppressed in Type IV antipassive with *miN-*

- a. **u=ku=ming-ula'*
 2=1SG=ANTIP-follow
 Intended: 'I follow you.'
- b. **ku=ming-ula' anaka*
 1SG=ANTIP-follow child
 Intended: 'I follow a child.' (Payne & Laskowske 1997: 433)

- (19) Bugis, Type I transitive AV construction with *m-*, restricted distribution

- a. *U=ita=i m-anré=i béppa-é*
 1SG.ERG=see=3ABS AV-eat=3ABS cake-DEF
 'I saw her eat the cake.' (Type I, subordinate clause)
- b. *Ia' m-anré=i otti-mmu.*
 1SG AV-eat=3ABS banana-2FAM.POSS
 'I ate your bananas.' (Laskowske 2016: 25) (Type I, contrastive focus)

- (20) Nasal, Marginal antipassive construction with

Yo kak khadu suah di lahan=nyo
 3 PFV finish INTR-burn LOC field=3

‘He burned his (entire) field.’ (McDonnell p.c.) (Type IV, antipassive, marginal)

(21) Old Enggano

a. 'O'o' ki-pudu e-koyo e'ana.
 2SG FOC-kill CORE-pig DEM
 ‘You kill that wild boar.’ (transitive)

b. 'O'o k-a-budu (i'ioo) u-koyo e'ana.
 2SG FOC-ANTIP-kill OBL OBL-pig DEM
 ‘You are a killer of that wild boar.’ (antipassive)
 (Hemmings under review, citing Kähler 1940)

(22) Voice marking in Bugis and Seko Padang¹³

Construction	Bugis	Seko Padang
Monovalent intr.	∅, ma-, maC-	miN-, mu-, mi-, m-, mammu-, <um>
Type I	m-	-
Type II	m-	maN-
Type IV	maC-	miN-, mu-, m-, <um>

(23) Embaloh¹⁴

a. ... to? manikam-ko nami lo?-ku?!
 intend ANTIP.catch-2SG.ABS already PREP-1SG.POSS
 ‘... do you want to catch me?!’ (oblique-marked patient)

b. Mondok i-aset di kabaŋ-en mamola anak ñoño I Laŋ Kibo.
 arrive on-top from river.bank-DEF ANTIP.make ASSOC shed PN L. K.
 ‘When he had gone up the river bank, Lang Kibo made a little shed.’ (bare NP patient)
 (Adelaar 1995: 390–391)

(24) Tagalog

a. Q: Nasaan ang kutsara ni Maria?
 where CN.PIVOT spoon PN.POSS M.
 ‘Where is Maria’s spoon?’

¹³Two languages showing such morphological divergence are Seko Padang and Bugis (Payne & Laskowske 1997; Laskowske 2016). In both, the prefix maC- undergoes morphophonemic changes conditioned by the initial segment of the stem, typically producing a geminate with consonant-initial roots (e.g. mab-bicasa ‘to speak’ from bicara; Hanson 2003: 28–32). Although these differences are not visible for all stems in Bugis, Type I constructions are distinguished by their argument indexing (patient indexed as an enclitic; see Duri §6.1.1). As shown in (22), Type IV constructions share marking with monovalent intransitives but differ from Type I and/or Type II constructions. Following Laskowske (2016), we distinguish m- and maC-: the prefixes remain synchronically distinct with vowel-initial stems, while m- is archaic with consonant-initial stems. Because Type II and IV are not always morphologically distinct, some authors collapse them into a single type (e.g. Hanson 2003); in our classification this corresponds to Type III. Although Laskowske treats Type I m- as PV, its parallels with Duri Type I N- (§6.1.1) suggest it is a remnant of an earlier bivalent AV construction. Thus, antipassive marking has diverged from AV morphology associated with structurally transitive clauses (Types I–II).

¹⁴The semi-antipassive in Embaloh is marked with maN-. The patient may either be marked oblique with the preposition lo-, as in (23a), or coded as an unmarked NP, as in (23b). In the former case, the patient may be a definite and specific referent; in the latter case, the referent of the patient NP is non-specific or generic.

- b. A1: *Gamit ni Lia (ang kutsara).*
 use.PV PN.CM₁ L. (CN.PIVOT spoon)
 ‘Lia is using (it/the spoon).’ (Patient Voice; pivot: spoon)
- c. A2: *I-p<in>ang-ka-kain ni Lia (ang kutsara).*
 CV-PANG<PFV>-RED-eat PN.CM₁ L. (CN.PIVOT spoon)
 ‘Lia is eating with (it/the spoon).’ (Circumstantial Voice; pivot: spoon)
- d. A3: *Na-kita=ko=[ng k<in>uha ni Lia (ang kutsara)].*
 PFV.PV-see=1SG.CM₁=[LK steal<PV.PFV> PN.CM₁ L. (CN.PIVOT spoon)]
 ‘I saw that Lia stole (it/the spoon).’ embedded Patient Voice; pivot: spoon
- e. A4: *Nakay Lia (ang kutsara).*
 EX.POSS L. (CN.PIVOT spoon)
 ‘The spoon is with Lia.’ (Chen 2025: 48) (plain actor voice; pivot: spoon)

(25) Bugis, Voice alternations, main clauses and neutral word-order

- a. *Na=uno=i ula-é Popi.*
 3ERG=kill=textsc3abs snake-DEF P.
 ‘Popi killed the snake.’ (basic transitive)
- b. *M-uno=i ula Popi.*
 AV-kill=3ABS snake P.
 ‘Popi killed a snake.’ (Type II, functional antipassive)
- c. *Mabb-uno ula=i Popi.*
 ANTIP-kill snake=3ABS P.
 ‘Popi was killing snakes.’ (Type IV, antipassive)
- d. *I-uno=i ela-é ku Popi.*
 PASS-kill=3ABS snake-DEF OBL P.
 ‘The snake was killed by Popi.’ (passive)

(26) Mori Bawah, Voice alternations, main clauses

- a. *Onae=mo ka=do m-pekule, ira m-pepate=o i Re’a*
 3SG=COMPL and=3PL PL-return 3PL.FUT PL-kill-3SG PN turtle
 ‘thereupon they returned, they were going to kill Turtle’ (basic transitive)
- b. *...ka=i pom-pepate singa.*
 and=3S ANTIP-kill lion
 ‘...and he killed a lion’ (Type II, functional antipassive)
- c. *Ta p<in>epate.*
 3SG.FUT <PASS>kill
 ‘He will/shall/must be killed.’ (Mead 2005: 698) (passive)

(27) Ampenan Sasak, Passive construction

- a. *Kaken=ne jaje siq kanak no*
 eat=3 cake AGT child that
 ‘The child ate a cake.’ (P-oriented transitive)
- b. *Te-kaken jaje no siq kanak no*
 PASS-eat cake that AGT child that
 ‘The cake was eaten by the child.’ (Khairunnisa 2022: 76, 79) (passive)

	Language	Geographical distribution	Subgroup affiliation	Overt marking for the putative antipassive?	Form of the putative antipassive marker	Marking for monovalent intransitive	Marking for basic transitive
1	Type I	Amis	Taiwan	Y	<um>, mi-, ma-	<um>, ma-, (mi-)	-en, ma-
2	Type I	Puyuma	Taiwan	Y	M- set (, me- m-, ma-, Ø)	M- set (, me- m-, ma-, Ø)	-aw
3	Type I	Atayal	Taiwan	Y	m-, , Ø	m-, , Ø	-un
4	Type I	Seediq	Taiwan	Y	m-, 	m-, 	-un, -in
5	Type I	Pawwan	Taiwan	Y	, <en>, m-, Ø	, <en>, m-, Ø	-en, -in
6	Type I	Tsou	Taiwan	Y	m0-, mi, mu-, m-, b-, m..m., <m>, Ø	m0-, mi, mu-, m-, b-, m..m., <m>, Ø	-a
7	Type I	Bunun	Taiwan	Y	ma-, m-, Ø	ma-, m-	-un
8	Type I	Straya	Taiwan	Y	m-, <m>, ma-, <um>	m-, <m>, ma-, <um>	-en, -an, Ø
9	Type I	Kavalan	Taiwan	Y	m-, , <um>, Ø	m-, , <um>, Ø	-an, ma-
10	Type I	Ilocano	Luzon	Y	<um>, ag-, mang-	<um>, ag-, (mang-)	-en
11	Type I	Ibatan	Batanes	Y	<om>, mang-, <om>, may-, mag-, maN-	<om>, mang-, <om>, may-, mag-, maN-	-en
12	Type I	Botolan Sambal	Luzon	Y	<om>, ma-, mag-, mang-, mangi-	<om>, ma-, mag-, mang-, mangi-	p[ɔ]g, ...-on, <in>/-on
13	Type I	Subanon	Mindanao	Y	m[i/o]-, m[i/o]g-, <um>	m[i/o]-, m[i/o]g-, <um>	-in, <in>
14	Type I	Tagalog	Luzon	Y	<um>, ma-, mag-, mang-	<um>, ma-, mag-, mang-	m-, p-, Ø-
15	Type I	Blaan	Mindanao	Y	m-, , Ø	m-, , Ø	gf-, on
16	Type I	Cebuano	Luzon	Y	mi-, ni-, ning-, mo-, mag-	mi-, ni-, ning-, mo-, mag-	zero, -in, -en
17	Type I	Kelabit	Borneo	Y	N-, neN-	N-, <um>, te-, pe-	-in, -en
18	Type I	Lun Bawang	Borneo	Y	ge-, beg-, meng-	ge-, beg-, meng-	b-, p-, Ø-
19	Type I	Begak/Ida'an	Borneo	Y	N- (AV)	N- (AV)	i- (optional), or proclitic
20	Type I	Karo Batak	Sumatra	Y	maN- (AV)	maN- (AV)	i- (optional) or 1st p proclitic
21	Type I	Gayo	Sumatra	Y	m-	m-	-in
22	Type I	Malagasy	Madagascar	Y	man-/fan-	man-/fan-	Ø-
23	Type IV	Chamorro	Guam, northern Mariana islands	Y	maC-, maN-	<um>, maC-	maN-, en, mangC-, mangi-
24	Type I	Arta (Negrito)	Luzon	Y	meN-	meN-, ber-	(meN-), di-
25	Type I	Indonesian	Indonesia	Y	N-	N-, m-	(N-), di-/null
26	Type I	Javanese	Java	Y	m-	m-	di-
27a	Type I	Nasal 1	Sumatra	Y	N-/me-/em-	null, N m-/me-/em-, te-	zero
27b	Type IV*	Nasal 2	Sumatra	Y	m-	me-, (me)N-, be-, te-	zero
28	Type I	Besemah	Sumatra	Y	m-	bare, maC-, m-, (ma-)*	zero
29a	Type I	Bugis 1	Sulawesi	Y	m-	bare, maC-, m-, (ma-)*	zero
29b	Type II	Bugis 2	Sulawesi	Y	maC-	bare, maC-, m-, (ma-)*	zero
29c	Type IV	Bugis 3	Sulawesi	Y	aN-	bare, maC-, m-, (ma-)*	zero
30a	Type I	Makassar 1	Sulawesi	Y	poN-	zero, aC-, amm-	zero
30b	Type II	Makassar 2	Sulawesi	Y	zero	zero, aC-, amm-	zero
31	Type II	Mori Rawah	Sulawesi	Y	zero	zero, be-, N-	zero
32a	Type I	Sasak 1	Lesser Sunda	N	zero	zero, be-, N-	zero
32b	Type II*	Sasak 2	Lesser Sunda	N	(ae-class subject prefix)	(ae-class subject prefix, sometimes also ae-class, ao-class)	(ae-class subject prefix)
33	Other - DOI	Muna 1	Sulawesi	N	N-, mag-	N-, mag-	zero, -in-
34	Type III	Yakan	Mindanao	Y	N-	N-	zero
35a	Type I	Duri 1	Sulawesi	Y	N-	N-	zero
35b	Type II	Duri 2	Sulawesi	Y	maN- (also m-, ma-)	maN-, mang-, meN-, me-, -um-, ke-(?)	zero
36	Type III	Embaloh	Sulawesi	Y	ang-, (m)ag-, maka-	maN- (also m-, ma-), a-, ara-, be-	zero
37	Type III	Sama Bangingi	Mindanao	Y	maC-	ang-, mag-, maka-, pñ-, -m-, a-	zero, -m-, pug-
38	Type II	Mandar	Sulawesi	Y	maN-	maN-, mu-, mi-, m-, mammu-, -um-	zero, mñ-, me-, meC-
39a	Type II	Seko Padang 1	Sulawesi	Y	maN-, mu-, m-, -um-	maN-, mu-, mi-, m-, mammu-, -um-	zero
39b	Type IV	Seko Padang 2	Sulawesi	Y	N- (AV)	N- (AV)	zero
40	Type I	Balinese	Lesser Sunda	Y	- (person agreement)	- (person agreement)	zero
41	Type I	Acehnese	Sumatra	N	aH-	bu-, bare, ki-	bare, ki-
42a	Type I	Enggano 1	Sumatra (Barrier Islands)	Y	bu-	bu-, bare, ki-	bare, ki-
42b	Type I	Enggano 2	Sumatra (Barrier Islands)	Y	bu-	bu-, bare, ki-	bare, ki-
42' a	Type I	Old Enggano 1	Sumatra (Barrier Islands)	Y	aH-	bu-, bare, ki-	bare, ki-
42' b	Type IV	Old Enggano 2	Sumatra (Barrier Islands)	N*	(-um-)	bare, (-um-)	bare
43	Type I	Tulang Besi	Sulawesi	Y	N-	bare, N-	bare
44	Type I	Sundanese	Java	Y	N-	bare, N-	e-
45	Type I	Madurese	Java	Y	N-	bare, N-	bare (inverse voice)
46	Type I	Mualang	Borneo	Y*	N-	bu-, N-, m(t)u-,	ni- or vowel change
47	Type I	Matq	Borneo	Y	N-	na, g-, <um>	na-
48	Type I	Paku	Borneo	Y	mag-, mag-, nega-	mag-, mag-, nega-	in-, ka-, um-
49	Type I	Tawbuid	Mindoro	Y	<um>	<um>	(-b)on
50	Type I	Hiligaynon	Visayas	Y	mVng-, mVngV-, mVn-, mVr-	mVng-, mVngV-, mVn-, mVr-	ni-, m-, nipa-
51	Type I	Tondano	Sulawesi	Y	zero, <um>, ma-, mo-, ming-	zero, <um>, ma-, mo-, ming-	-on, ni-
52	Type II	Southern Sma	Mindanao	Y			
53	Type I	Balantak	Sulawesi	Y			

	Language	Geographical distribution	Subgroup affiliation	Can patient be expressed?	Can an overt patient be definite?	How are AP patients indexed?	Source material	Glotto code
1	Type I	Amis	Taiwan			non-pivot object-marking	primary data, Wu 2006	amis1246
2	Type I	Puyuma	East Formosan	Y	Y	non-pivot object-marking	primary data, Teng 2008	puyul239
3	Type I	Taiwan	Puyuma	Y	Y	non-pivot object-marking	Huang and Wu 2018	atay1247
4	Type I	Taiwan	Atayalic	Y	Y	non-pivot object-marking	primary data, Holmer 1996	atol1264
5	Type I	Taiwan	Atayalic	Y	Y	non-pivot object-marking	Chang 2006	paiv1248
6	Type I	Taiwan	Tsouic	Y	Y	non-pivot object-marking	primary data, Lin 2009; Lin 2023	tsou1248
7	Type I	Taiwan	Bunun	Y	Y	non-pivot object-marking	De Bussier 2009	bunul267
8	Type I	Taiwan	East Formosan	Y	Y	non-pivot object-marking	Adelaar 2011	sira1267
9	Type I	Taiwan	East Formosan	Y	Y	non-pivot object-marking	Hsieh 2018	kava1241
10	Type I	Luzon	Northern Luzon	Y	Y	non-pivot object-marking	Rubino 1997	iloil237
11	Type I	Ibatan	Batanic	Y	Y	non-pivot object-marking	Maree 2007	ibat1238
12	Type I	Botolan Sambal	Central Luzon	Y	Y	non-pivot object-marking	Antworth 1979	boto1242
13	Type I	Subanon	Greater Central Philippine	Y	Y	non-pivot object-marking	Estioca 2020	west2557
14	Type I	Tagalog	Greater Central Philippine	Y	Y	non-pivot object-marking	Schachter & Otnes 1972; Bondoc p.c.	taga1270
15	Type I	Bhan	Bilic	Y	Y	non-pivot object-marking	Bondoc 2015	bhaa1241
16	Type I	Cebuano	Greater Central Philippine	Y	Y	non-pivot object-marking	Katagiri 2005	cebu1242
17	Type I	Kalahit	Western Indonesian	Y	Y	bare NP	Hemmings 2021	kelai258
18	Type I	Lun Bawang	Western Indonesian	Y	Y	bare NP	Mortenson 2021	lund1271
19	Type I	Begak/Idan	Western Indonesian	Y	Y	bare NP	Goudswaard 2005	idaa1241
20	Type I	Karo Batak	Sumatran	Y	Y	bare NP, except 3rd sg -sa	Woolams 1996	bata1293
21	Type I	Gayo	Sumatran	Y	Y	bare NP or enclitic pronoun	Eades 2005	gayo1244
22	Type I	Malagasy	Madagascar	Y	Y	bare NP	Penson 2004	pha1254
23	Type IV	Chamorro	Guam, northern Mariana islands	Y	Y	oblique case	Chung 2020, Chung 2025	cham1312
24	Type I	Ara (Negrito)	Luzon	Y	Y	non-pivot object-marking	Kimoto 2017	arta1239
25	Type I	Indonesian	Northern Luzon	Y	Y	bare NP or -nya for 3rd person	Arka & Manning 1993	indo1316
26	Type I	Javanese	Malayic	Y	Y	bare NP	Ogloblin 2005, Ewing 1999	java1254
27a	Type I	Nasul 1	Javanese	Y	Y	bare NP following verb, sometimes 3rd person enclitic	McDonnell p.c., Hakim 2024, Billings n.d.	nasal239
27b	Type IV*	Sumatra	Sumatran	Y	Y	PP	McDonnell p.c., Hakim 2024, Billings n.d.	cent2053
28	Type I	Besemah	Sumatra	Y	Y	bare NP immediately following verb, sometimes 3rd person enclitic	McDonnell p.c.	bug1244
29a	Type I	Bugis 1	Malayic	Y	Y	postverbal NP, enclitic pronoun (in subordinate clauses)	Laskowski 2016, Hanson 2002	bug1244
29b	Type II	Bugis 2	South Sulawesi	Y	Y	bare NP	Laskowski 2016, Hanson 2002	bug1244
29c	Type IV	Bugis 3	South Sulawesi	Y	Y	incorporated NP or oblique case-marked enclitic pronoun with optional bare NP	Laskowski 2016, Hanson 2002	bug1244
30a	Type I	Makassar 1	South Sulawesi	Y	Y	enclitic pronoun with optional bare NP	Jukes 2020	maka1311
30b	Type II	Makassar 2	South Sulawesi	Y	Y	bare NP	Jukes 2020	maka1311
31	Type II	Mori Bawah	Celebic	Y	N	bare NP	Mead 1999, 2005	mor1268
32a	Type I	Sasak 1	Lesser Sunda	Y	Y	bare NP	Khairunnisa 2022	sasa1249
32b	Type II*	Sasak 2	Lesser Sunda	Y	Y	bare NP	Khairunnisa 2022	sasa1249
33	Other - DOI	Muna 1	Sulawesi	Y	Y	bare NP	van den Berg 1995, 2013	muna1247
34	Type III	Yakan	Lesser Sunda	Y	Y*	bare NP or oblique free pronoun	Brainard and Behrens 2002	yaka1277
35a	Type I	Duri 1	Mindanao	Y	N	enclitic pronoun	K. Valkama 1993	duri1242
35b	Type II	Duri 2	Sulawesi	Y	N	bare NP	K. Valkama 1993	duri1242
36	Type III	Embaloh	Sulawesi	Y	N	bare NP or preposition marked	Adelaar 1995	emba1238
37	Type III	Sama Bangingi	Mindanao	Y	Y	oblique case + free pronoun or NP; rarely a bare NP	Gault 1999	bala1311
38	Type II	Mandar	Western Indonesian	Y	Y	bare NP	Lee 2008	mand1442
39a	Type II	Seko Padang 1	Sumatra	Y	Y	bare NP	Payne and Laskowski 1997	seko1243
39b	Type IV	Seko Padang 2	Sumatra	Y	Y	bare NP	Payne and Laskowski 1997	seko1243
40	Type I	Balinese	Lesser Sunda	N	NA	(patient suppressed)	Arka 2003, Udayana 2013	bali1278
41	Type I	Acehnese	Sumatra	Y	Y	bare NP	Asyik 1987; Patriant o forthcoming	achi1257
42a	Type I	Enggano 1	Sumatra (Barrier Islands)	Y	Y	optional e-prefix (core case), bare NP or pronoun	Hemmings forthcoming	engg1245
42b	Type I	Enggano 2	Sumatra (Barrier Islands)	Y	Y	optional e-prefix (core case), bare NP or pronoun	Hemmings forthcoming	engg1245
42'a	Type I	Old Enggano 1	Sumatra (Barrier Islands)	Y	Y	e-prefix (core case) + NP	Hemmings forthcoming	engg1245
42'b	Type IV	Old Enggano 2	Sumatra (Barrier Islands)	Y	Y	u-prefix (oblique case), optional preposition	Hemmings forthcoming	engg1245
43	Type I	Tukang Besi	Sulawesi	Y	Y	te (core case marker), no suffix	Donohue 1994, 1999	tuka1248
44	Type I	Sundanese	Sulawesi	Y*	Y	bare NP, except 3rd person -na	Kurniawan 2011	sund1252
45	Type I	Madurese	Java	Y	Y	bare NP	Davies 2005, 2010	nuci1460
46	Type I	Mtaling	Java	Y	Y	bare NP	Tjia 2007	muai1241
47	Type I	Matéq	Borneo	Y	Y	bare NP	Cornell 2013	kemb1249
48	Type I	Paku	Borneo	Y	Y	bare NP	Diedrich 2018	paku1239
49	Type I	Towhoid	Borneo	N	Y	bare NP	Fleming 2022	bata1318
50	Type I	Hiligaynon	Mindoro	Y	Y	bare NP	Mithun 2023	hili1240
51	Type I	Tondano	Visayas	Y	Y	bare NP	Brickell 2014	ton1251
52	Type II	Southern Sinama	Sulawesi	Y	Y	bare NP	Rajik and Tarusan 2023, Trick 2008	sama1302
53	Type I	Balatak	Mindanao	N*	N*	bare NP	van den Berg 2012	bala1315

Notes

- 1 Abbreviations: Y: Yes; N: No; NA: Not applicable; ND: Not determinable from available data; *: Inferred from available data
- 2 [24] Arta: Alongside a *maN*-marked AV construction, Kimoto (2017:301) describes a *maC*-marked antipassive-like construction in Arta, in which “the patient [is] optionally coded by the oblique phrase.” Upon consideration, we do not include this construction in our database, since (i) given the limited data presented it is unclear whether the case marker of the patient is a true non-core case marker and (ii) the prefix attaches not only to two-place verbs but also to prototypically unaccusative and stative verbs, which are inherently incompatible with antipassivization. Relevant data can be found in Kimoto (2017:301–302), along with additional *maC*-marked examples throughout his work.
- 3 [32b] Sasak: Type II (Agentive Voice marked with *N-*) is not fully productive. Speakers use it in spontaneous, natural speech, but not in elicitation (Khairunnisa 2022).
- 4 [42a] Enggano, Type I: Hemmings et al. (2022) handout notes that P can be non-realized, but it is not clear whether this is independent of the context.
- 5 [42b] Old Enggano Type IV: Hemmings et al. (2022) handout notes that P can be non-realized, but the verbs shown in the examples are possibly ambitransitive, i.e. ‘eat’, ‘drink’.
- 6 [47] Matéq: An argument with high salience or discourse topicality can be elided or omitted according to Connell (2013). However, it is not stated that arguments can be omitted when they represent non-recoverable referents.
- 7 [52] Southern Sinama: Rajik and Tarusan (2023) do not explicitly state whether AV patients can be definite. However, based on extensive data presented in their grammar, there are no examples showing an AV patient marked as definite (although some corresponding English examples use the definite article *the*). Additionally, no examples show proper names as AV patients. In contrast, PV patients frequently carry definite markers and can appear as proper names. We interpret this to indicate that AV patients cannot be definite in Southern Sinama.