## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)  1. Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading Symbol CUMMINS INC [CMI]						5. Relationship of Reporting Person(s) to Issuer							
NELSON GEORGIA R										(Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 500 JACKSON ST.			3. Date of Earliest Transaction (Month/Day/Year) 05/08/2018								r (give title belo		Other (specify	pelow)		
(Street) COLUMBUS, IN 47201			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City		(State)	(Zip)		Т	able I	- Non	-Deri	ivative S	Securities	Acan	ired. Disne	osed of, or I	Reneficially	Owned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		3. Transaction Code (Instr. 8)					uired of (D)	d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownership Form:	Beneficial	
				(Month/Da	ıy/Yeaı		ode	V	Amour	(A) or (D)	Price	(D) Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)  Ownership Form: Direct (D) or Indirect (I) (Instr. 4)  17,865.613  I By Spouse  It to the collection of information are not required to respond unless arrently valid OMB control number.				
Common	l		05/08/2018				A		938	A	\$ 0	17,865.6	613 <u>(1)</u>		D	
Common	l											1,977			I	
				Derivative			equire	conta the fo	ained in orm dis sposed	n this for splays a of, or Ben	m are curre eficial	not requesting ntly valid	ired to res	spond unle	SS	14/4 (9-02)
1. Title of	2.	3. Transactio	,	<i>e.g.</i> , puts, c	ans, w	arran 5.	ts, op		te Exer		<del></del>	itle and	8 Price of	9 Number	of 10.	11. Natur
		*****	Execution Day Year) any			Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year) U.S.		Ame Und Secu	ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form o Derivat Securit Direct ( or India	hip of Indirect Beneficia Ownersh (Instr. 4)  D)	
				Cod	e V	(A)	(D)	Date Exerc		Expiration Date	1 Title	Amount or Number of Shares				

#### **Reporting Owners**

D ( O N (					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
NELSON GEORGIA R 500 JACKSON ST. COLUMBUS, IN 47201	X				

#### **Signatures**

/s/ Mark Sifferlen, Attorney-In-Fact	05/08/2018	
**Signature of Reporting Person	Date	

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Includes 416.063066 dividend equivalent shares credited under the Cummins Inc. Deferred Compensation Plan for Non-Employee Directors since the most recently filed Form 4

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.