FORM 4

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

OMB APPR	OVAL	
OMB Number:	3235-02	87
Estimated average	burden	
nours per response	e (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 Ty	pe Response	s)												
Name and Address of Reporting Person* Nelson Kimberly A			2. Issuer Name and Ticker or Trading Symbol CUMMINS INC [CMI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
500 JAC) KSON ST	(First) REET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/13/2020				Office	r (give title belo	w)	Other (specify	below)		
(Street) COLUMBUS, IN 47201			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person						
(City		(State)	(Zip)	Та	blo I Nov	. Dow	ivativa C		A 00000	ined Dies	and of au I	Domoficially	Oremad	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transa Code (Instr. 8)		4. Secur (A) or D	ities Acq	uired of (D)	equired, Disposed of, or Beneficially ed		6. Ownership	7. Nature of Indirect Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	l		10/13/2020		A		471	A	\$ 0	731			D	
Common	ı									600			I	2013 Family Trust
Common	1									82			I	By Spouse
Common	ı									400			I	By Spouse - 2015 Family Trust
Reminder:	Report on a s	separate line for	r each class of secur	ities beneficially ov		Pers cont	ons who	respon this for	m are	not requ	ction of inf uired to res OMB cont	spond unle	ess	C 1474 (9-02)
				Derivative Securiti						ly Owned				
1. Title of Derivative Security (Instr. 3)	ivative or Exercise or Exercise Price of Derivative Security Date Execution Date, if Transaction or Code of Derivative Security Execution Date, if Transaction of Code (Instr. 8) Execution Date, if Transaction of Code of (Instr. 8) Month/Day/Year) Ac (A Di of (Instr. 8)		5. Number	6. Da and I (Mor rivative curities quired) or sposed (D) str. 3,		Date Exercisable Expiration Date onth/Day/Year)		itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	tive Ownership (y: (D) rect		
				Code V	(A) (D)	Date Exer	Ecisable I	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Nelson Kimberly A 500 JACKSON STREET COLUMBUS, IN 47201	X						

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).

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.