FORM 4

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

OMB APPROVAL
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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

1. Name and Address of Reporting Person* ChangDiaz Franklin R		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 Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 500 JACKSON STREET		3. Date of Earliest Transaction (Month/Day/Year) 05/11/2021											
(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 PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acqui	nired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		f (D) Beneficia Reported		nt of Securities ally Owned Following Transaction(s)		Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	VA	mount	(A) or (D)	Price	(Instr. 3 ar	and 4)		Direct (D) or Indirec (I) (Instr. 4)	Ownership (Instr. 4)
Common	05/	/11/2021		A	5	75	Α :	\$ 0	8,620			D	
	eparate line for eac	ch class of securi	ities beneficially ov		Person contair	s who ned in t	this forr	m are	not requ		formation spond unle trol numbe	ss	1474 (9-02)
Reminder: Report on a s	eparate line for eac	ch class of securi	ities beneficially ov		Person contair	s who ned in t	this forr	m are	not requ	ired to res	spond unle	ss	1474 (9-02)
	3. Transaction Date (Month/Day/Year)	Table II - I	Derivative Securities, g., puts, calls, was te, if Transaction Code (Instr. 8)	es Acquires prants, ope 5. Number of Derivative Securities Acquired (A) or Disposed	Person contain the form ed, Dispetions, co 6. Date and Exp	s who ned in t m disp	this formulays a constant of the secure of t	eficiallities) 7. Ti Amo Unde	not requ ntly valid	OMB conf	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form o Derivat Security Direct (or Indir	11. National of Indirection Benefic Owners (Instr. 4
1. Title of Derivative (Instr. 3) Reminder: Report on a s 2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - I	Derivative Securities, yes, puts, calls, was te, if Transaction Code (Instr. 8)	es Acquires rrants, op 5. Number of Derivative Securities Acquired (A) or	Person contain the form ed, Dispetions, co 6. Date and Exp	s who ned in t m displayed of, overtib Exercises	this formulays a constant of the secure of t	m are currer eficiall rities) 7. Ti Amo Unde Secu (Insti	not requently valid by Owned tle and bunt of erlying critics	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported	of 10. Owners Form o Derivat Security Direct (or Indir	11. National of Indirection Benefic Owners (Instr. 4

D (O N (Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ChangDiaz Franklin R 500 JACKSON STREET COLUMBUS, IN 47201	X						

Signatures

/s/ Sharon Barner, Attorney-in-Fact	05/13/2021
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).

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.