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

Name and Address of Reporting Person * DOBBS STEPHEN B			2. Issuer Name and Ticker or Trading Symbol CUMMINS INC [CMI]					5	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) 05/10/2022					-						
(Street) COLUMBUS, IN 47201			4. If Amendment, Date Original Filed(Month/Day/Year)						Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City))	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Ow					Owned					
1.Title of Security (Instr. 3)		1	Oate Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	(Instr. 8		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Beneficia Reported		ally Owned Following Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership
				(Worlds Day) Tear	Code	V	Amount	(A) or (D)	Price	0 (1		or Indirect (I) (Instr. 4)		
Common	ı	(05/10/2022		A		882	A 5	0 8	12,206			D	
Reminder:	Report on a s	separate line for	each class of secur	nies beneficially of	whed direc	Perso	ons who	respon	n are	not requ		spond unle	ss	1474 (9-02)
Reminder:	Report on a s	separate line for	Table II - I	Derivative Securit	ies Acqui	Perso conta the fo	ons who ained in orm disp	respon- this form plays a c	n are urren ficiall	not requ tly valid	ired to res		ss	1474 (9-02)
1. Title of	2.	3. Transaction Date (Month/Day/Ye	Table II - I (a 3A. Deemed Execution Date any	Derivative Securites, puts, calls, was te, if Transaction Code (Instr. 8)	ies Acquinarrants, o	Persoconta the for red, Disposions, 6. Da and E (Mon	ons who ained in orm disp	this form plays a c f, or Bene ible securi isable in Date	ficially fic	not required the valid of the and the value of the value	ired to res	spond unle	of 10. Ownersh Form of Derivatir Security Direct (I or Indire	11. Nation of Indirection Benefic Owners (Instr. 4

B 41 0 V	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
DOBBS STEPHEN B 500 JACKSON STREET COLUMBUS, IN 47201	X					

Signatures

/s/ Sharon Barner, Attorney-in-Fact	05/11/2022
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.