FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 * LYNCH THOMAS J | | | 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 | | | | |
|---|---|------------------------------------|--|--|--|--|------------------------------|---|--|---------------------------------|---|---|---|
| (Last) (First) (Middle) 500 JACKSON STREET | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/10/2022 | | | | | | Office | r (give title belo | w)(| ther (specify l | pelow) |
| (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) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | |)wned | | | | | |
| 1.Title of Security (Instr. 3) | Da | vate Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | (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) | | 6. Ownership Form: | Beneficial | |
| | | | | Code | V | Amount | (A) or (D) | Price | (Instr. 3 a | nd 4) | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common | 05 | 5/10/2022 | | A | | 882 | A 5 | \$ 0 | 9,664 | | | D | |
| | | | | | | | | | | | pond unles | | |
| | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year | 3A. Deemed Execution Dat any | (Instr. 8) | es Acquire rrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D) | ed, Distions, of the following of the following the follow | orm dis | f, or Beneible securion bate | ficial ities) 7. Ti Amo Und Secu | ntly valid | OMB cont | | f 10. Owners Form of Derivat: Security Direct (or Indire | Ownersh (Instr. 4) D) |
| Derivative Conversion Security or Exercise (Instr. 3) Price of Derivative | Date | 3A. Deemed Execution Dat any | e.g., puts, calls, wa 4. Transaction Code (Instr. 8) | es Acquire rrants, op 5. Number of Derivative Securities Acquired (A) or Disposed | ed, Distions, of the following of the following the follow | posed o convert te Exerc | f, or Beneible securion bate | ficial ities) 7. Ti Amo Und Secu (Inst | ly Owned itle and ount of erlying arities tr. 3 and | 8. Price of Derivative Security | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(| f 10. Owners Form of Derivat: Security Direct (or Indires) (I) | hip of Indire Beneficia Ownersh (Instr. 4) |
| Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative | Date | 3A. Deemed Execution Dat any | e.g., puts, calls, wa 4. Transaction Code (Instr. 8) | es Acquire rrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | the fored, Distions, of and E (Montal Date | posed o converti te Exerc expiration th/Day/ | f, or Beneible securion bate | ficial ities) 7. Ti Amo Und Secu (Inst 4) | ly Owned itle and ount of erlying urities | 8. Price of Derivative Security | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(| f 10. Owners Form of Derivat: Security Direct (or Indires) (I) | hip of Indire Beneficia Ownersh (Instr. 4) |

| D (1 0 N / | Relationships | | | | | |
|--------------------------------------|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| LYNCH THOMAS J 500 JACKSON STREET | X | | | | | |
| COLUMBUS, IN 47201 | | | | | | |

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.