<b>FORM</b>	4
-------------	---

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

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

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

#### 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 Respons	ses)		-									
1. Name and Address HARRIS RICHAI	2. Issuer Name <b>and</b> Ticker or Trading Symbol CUMMINS INC [CMI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) 500 JACKSON	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/13/2006						X         Officer (give title below)         Other (specify below)           Treasurer         Treasurer			
(Street) 4. If Amendmet COLUMBUS 47201				nt, 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									
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	•	f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Indir Form: Benefic	Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common		02/13/2006		A <u>(1)</u>		2,400	00 A \$0		5,200	D		
Common		02/13/2006		F		837	D	\$ 99.88	4,363	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of		3. Transaction	3A. Deemed	4.		5.		6. Date Exer					9. Number of		11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Numb	ber	and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) or	r						Reported	or Indirect	
						Dispo	sed						Transaction(s)	(I)	
						of (D)	)						(Instr. 4)	(Instr. 4)	
						(Instr	. 3,								
						4, and	15)								
											Amount				
								D.	т ·		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
HARRIS RICHARD E 500 JACKSON COLUMBUS 47201			Treasurer					

### **Signatures**

David C. Wright Attorney-in-Fact	02/15/2006
**Signature of Reporting Person	Date

# **Explanation of Responses:**

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Shares earned from February 13, 2004 target awards, based on 2004-2005 Company financial performance. Shares are subject to forfeiture until February 13, 2007.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4(b)(v).