## FORM 4

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

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

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

to-Buy)

#### 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

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	pe Response		:	2 Igano	u Nic		a Tie	dran an'	Trodin	o Crumb	val		5 Relationsh	in of Renorti	ng Person(s)	to Issuer	
Name and Address of Reporting Person * Freeland Richard Joseph				2. Issuer Name and Ticker or Trading Symbol CUMMINS INC [CMI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Office (circuit below)  Office (circuit below)				
(Last) (First) (Middle) 500 JACKSON STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/05/2014							(ear)		X Officer (give title below) Other (specify below) President - Engine Business				
(Street) COLUMBUS, IN 47201				4. If Amendment, Date Original Filed(Month/Day/Year)							ay/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					
(Cit		(State)	(Zip)				Tabl	e I - No	on-De	rivative	Securiti	es Acqui	red, Dispose	d of, or Bend	eficially Ow	ned	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			2A. Dee	i	3. Transaction 4. Securities Acquired					uired	5. Amount of Securities Beneficially				7. Nature		
			Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)		(Instr. 8)			(A) or Disposed of (Instr. 3, 4 and 5)		f (D) Owned Follo Transaction( (Instr. 3 and				Ownership Form: Direct (D) or Indirect	Beneficial Ownership	
							С	ode	V.	Amount	(A) or (D)	Price				(I) (Instr. 4)	(Instr. 1)
Common	1		03/05/2014					A	·	7,545	A	\$ 0	35,765			D	
Common	Common 03/05/2014		03/05/2014				F	<u>(1)</u>		2,513	10	\$ 145.92	2 33,252			D	
Common												2,249.06 <sup>(</sup>	<u>2)</u>		I	By 401(k) Plan	
1. Title of Derivative Security (Instr. 3)	Conversion	rcise (Month/Day/Year) any (Month/Day/Year) (Month/Day/Year)			Code of		(Month/Day/Yourities nired or osed b)) r. 3,			Date	ate of Ur Year) Secur		and Amount erlying ies 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	tive Owner cy: (Instr (D) rect
				Code	V		(D)	Date Exerc	eisable		iration	Title	Amoun or Numbe of Shares				
Stock Option (Right- to-Buy)	\$ 58.115							03/0	1/201	12 03/	01/2020	Comn	non 10,900	)	10,900	) D	
Stock Option (Right- to-Buy)	\$ 19.42							03/02	2/201	1 03/	02/2019	Comn	non 3,650		3,650	D	
Stock Option (Right- to-Buy)	\$ 120.28							04/02	2/201	4 04/	02/2022	Comn	non 11,030	)	11,030	) D	
Stock Option (Right-	\$ 111.84							04/02	2/201	5 04/	02/2023	Comn	non 16,450	)	16,450	D	

Stock   Option (Right-to-Buy)   \$ 119.77	8,150	8,150	D	
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### **Reporting Owners**

P (1 0 V /		Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Freeland Richard Joseph								
500 JACKSON STREET			President - Engine Business					
COLUMBUS, IN 47201								

#### **Signatures**

/s/ Mark Sifferlen, Attorney-In-Fact	03/06/2014		
**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).
- (1) Shares withheld to satisfy tax liabilities relating to earned performance shares.

The number of shares is based on the dollar value of the reporting person's interest in the Cummins Stock Fund under the Company's 401(k) plan as most recently provided by the plan.

(2) The actual number of shares underlying the interest is not known since the Cummins Stock Fund is a unitized account consisting of approximately 98% common stock and 2% cash or cash equivalents.

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.