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

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

to-Buy) Stock Option (Right-

to-Buy) Stock Option

(Rightto-Buy) \$ 119.77

\$ 120.28

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

	ction 1(b).	1 11 00 pos		In	vest	tment	Cor	npany Ac	et of	f 1940)	. 01 500		0(11)	, 1 4110				
(Print or Type Responses) 1. Name and Address of Reporting Person * ROSE MARYA M				2. Issuer Name and Ticker or Trading Symbol CUMMINS INC [CMI]							4	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last) (First) (Middle) 500 JACKSON STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018									Director 10% Owner X Officer (give title below) Other (specify below) V.P CAO						
(Street)				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						
COLUMBUS, IN 47201 (City) (State) (Zip)																Reporting Perso			
											ired, Disposed of, or Beneficially Owned				Natara				
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year						Cod (Ins		(A)	or Disposed of (D) str. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership o Form:		eneficial		
			(Month/Day/Year)			ode V	An	(A) or (D)		Price	(Instr. 3 and 4) Director Inc (I) (Instr.		direct (I	wnership nstr. 4)					
Common	ı		03/01/2018				A	2,	149	A	\$ 0	17,714		D					
Common	1		03/01/2018			F	<u>s(1)</u>	64	10	D	\$ 160.89	17,074		D					
Common											298.87 ⁽²⁾		I		y 01(k) lan				
			Table II -					in th disp cquired, D	iis fo lays ispo	orm as a cu	re not i rrently , or Ben	required valid Of eficially (I to res MB co	spond ntrol n	unless the	tion contai e form	iicu	SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	tion	5.	ber vative rities ired r osed)	6. Date Ex Expiration (Month/Da	erci:	sable a		7. Title of Unde Securiti (Instr. 3	erlying ies			9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Do Se Do or or (I)	ownership orm of perivative ecurity: pirect (D) r Indirect	(Instr. 4)
				Code	V	(A)	(D)	Date Exercisabl	le	Expir Date	ation	Title	or Ni of	umber					
Stock Option (Right- to-Buy)	\$ 109.09							04/04/20)19	04/0	4/2026	Comm	non 22	2,310		22,310		D	
Stock Option (Right-	\$ 111.84							04/02/20)15	04/0	2/2023	Comm	non 10	0,970		10,970		D	

05/02/2013 | 05/02/2021 | Common | 5,220

04/02/2014 | 04/02/2022 | Common | 7,350

5,220

7,350

D

D

Stock Option (Right- to-Buy)	\$ 136.82			04/02/2018	04/02/2025	Common	10,280	10,280	D	
Stock Option (Right- to-Buy)	\$ 149.34			04/02/2017	04/02/2024	Common	8,190	8,190	D	
Stock Option (Right- to-Buy)	\$ 149.72			04/03/2020	04/03/2027	Common	14,380	14,380	D	

Reporting Owners

Post Control	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
ROSE MARYA M								
500 JACKSON STREET			V.P CAO					
COLUMBUS, IN 47201								

Signatures

/s/ Mark Sifferlen, Attorney-In-Fact	03/05/2018
**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 each 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.