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

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 Ty	rpe Response	s)	-															
1. Name and Address of Reporting Person * Barner Sharon R				2. Issuer Name and Ticker or Trading Symbol CUMMINS INC [CMI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Director Over (constitution)						
(Last) (First) (Middle) 500 JACKSON STREET				3. Date of Earliest Transaction (Month/Day/Year) 04/03/2018								X Officer (give title below) Other (specify below) VP - Gen. Counsel						
(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					
(Cit	y)	(State)	(Zip)				Γabl	e I - Noi	ı-Deri	vative S	Securitie	s Acqui	ired, D	Disposed	of, or Bene	ficially Own	ed	
(Instr. 3) Date			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		Coc (Ins	str. 8)	(1	A) or D instr. 3,	ities Acquisposed of 4 and 5) (A) or	of (D)	Owned Transa		Securities Being Reported	d	Ownership (Form: I Direct (D) (I) (I)	'. Nature of Indirect Beneficial Ownership Instr. 4)	
Common						(Code V		mount	(D)	Price	4,865				(Instr. 4) D		
Reminder:	Report on a s	separate line for each	n class of securities b					Pe in di	ersons this f splays	orm an	re not re rrently v	d to the equirec	e colle d to re MB co	ection c espond ontrol n	unless the	ion contain form	ed SEC 1	474 (9-02)
	ı	1	T	(e.g., pu		alls, wa	rran	ts, optic	ons, co	nvertib	le securi	ities)				1		
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 2 and 5)	tive ies ed	Expira	Expiration Date of U Month/Day/Year) Sec			of Und Securi	7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	Beneficia Ownersh (Instr. 4)
				Code	V	(A)	(D)	Date Exercis	sable	Expir Date	ation	Title	1	Amount or Number of Shares				
Stock Option (Right- to-Buy)	\$ 160.1	04/03/2018		A		9,560		04/03	/2021	04/0	3/2028	Comi	non	9,560	\$ 0	9,560	D	
Stock Option (Right- to-Buy)	\$ 109.09							04/04	/2019	04/0	4/2026	Comi	mon	19,410		19,410	D	
Stock Option (Right- to-Buy)	\$ 111.84							04/02	/2015	04/0	2/2023	Comi	mon	6,680		6,680	D	
Stock Option (Right- to-Buy)	\$ 120.28							04/02	/2014	04/0	2/2022	Comi	non	4,410		4,410	D	
Stock Option (Right- to-Buy)	\$ 136.82							04/02	/2018	04/0	2/2025	Comi	mon	8,040		8,040	D	
Stock Option (Right- to-Buy)	\$ 149.34							04/02	/2017	04/0	2/2024	Comi	mon	5,700		5,700	D	

(Right-	\$ 149.72				04/03/2020	04/03/2027	Common	12,510	12,510	D	
to-Buy)											

Reporting Owners

D (1 0 N /	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Barner Sharon R									
500 JACKSON STREET			VP - Gen. Counsel						
COLUMBUS, IN 47201									

Signatures

/s/ Mark Sifferlen, Attorney-In-Fact	04/05/2018
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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.