

1.) CORPORATION NAME:

Cummins Inc.

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F0443012**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000,000
PREFER	1,000,000
PREF	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 JACKSON ST

CITY/ST/ZIP: COLUMBUS, IN 47201

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	TOM LINEBARGER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	500 JACKSON ST		
CITY/ST/ZIP/CO:	COLUMBUS, IN 47201		
NAME:	GEORGIA R. NELSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 JACKSON STREET		
CITY/ST/ZIP/CO:	COLUMBUS, IN 47201		
NAME:	STEPHEN B. DOBBS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 JACKSON STREET		
CITY/ST/ZIP/CO:	COLUMBUS, IN 47201		
NAME:	ROBERT J. BERNHARD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 JACKSON STREET		
CITY/ST/ZIP/CO:	COLUMBUS, IN 47201		
NAME:	WILLIAM I. MILLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 JACKSON STREET		
CITY/ST/ZIP/CO:	COLUMBUS, IN 47201		
NAME:	FRANKLIN R. CHANG DIAZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 JACKSON STREET		
CITY/ST/ZIP/CO:	COLUMBUS, IN 47201		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT K. HERDMAN DIRECTOR 500 JACKSON STREET COLUMBUS, IN 47201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL WARE DIRECTOR 500 JACKSON STREET COLUMBUS, IN 47201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALEXIS M. HERMAN DIRECTOR 500 JACKSON STREET COLUMBUS, IN 47201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TONY SATTERWAITE VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JILL COOK VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVE CHAPMAN VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN WALL VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARYA M. ROSE VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LISA YODER VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK A. LEVETT VICE PRESIDENT 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK JOSEPH WARD VP/CFO 500 JACKSON STREET COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: ANANT TALAULICAR TITLE: VICE PRESIDENT ADDRESS: 500 JACKSON STREET CITY/ST/ZIP/CO: COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: PAMELA L. CARTER TITLE: VICE PRESIDENT ADDRESS: 500 JACKSON STREET CITY/ST/ZIP/CO: COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RICHARD JOSEPH FREELAND TITLE: VICE PRESIDENT ADDRESS: 500 JACKSON STREET CITY/ST/ZIP/CO: COLUMBUS, IN 47201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ TOM LINEBARGER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TOM LINEBARGER, PRESIDENT PRINTED NAME AND CORPORATE TITLE	11/15/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		