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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* LORD JONATHAN T MD | | | | | 2. Issuer Name and Ticker or Trading Symbol HUMANA INC [HUM] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
|--|---|--|--------|---------------------|---|---|-----------|------|--|-------|--------------------|---------------------------------|---|--|--|---|---|---|--|--|--|
| (Last) | • | (First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2005 | | | | | | | | | X Officer (give title below) below) Sr VP & Chief Innovation Off. | | | | | | |
| | HUMANA INC. 500 WEST MAIN STREET | | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | VILLE KY 40202 | | | | - | | | | | | | | | | Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | Zip) | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - | Non-Deri | vative | Sec | urities | s Ac | quired, | Dis | posed (| of, or Ber | neficiall | y Owned | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | y/Year) | Execution Date, | | • | Transaction Disposed Code (Instr. and 5) | | | ties Acquire d Of (D) (Ins | | 5. Amount Securities Beneficial Owned | ly | Form: D (D) or Indirect | | 7. Natur Indirect Benefici Ownersh | rect eficial nership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Following Reported Transactio (Instr. 3 ar | on(s) | (Instr. 4 | *) | (Instr. 4) | | | |
| Humana Common ⁽¹⁾ 02/28/20 | | | | | |)05 | | S | | 27,60 | 0 D | \$0 ⁽²⁾ | 9,966 | | Е | D | | | | | |
| Humana Common ⁽¹⁾ | | | | | | | | | | | | 1,31 | 16 I | | | See Footnote ⁽³⁾ | | | | | |
| | | | Tal | ble II - Der | | | | | | | | or Benefi le securit | | wned | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | eemed tion Date, | 4. Transaction Code (Instr. 8) | | 5. Number | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | sable and | | | of Derivative Security (Instr. 5) deriva Security Benefi Owned Follow Repor | | ties cially l ving ted action(s) | 10. Owners Form: Direct (or India (I) (Inst | hip of I Bei D) Ow rect (In: | . Nature Indirect eneficial vnership str. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |
| Options ⁽⁴⁾ | \$6.625 | | | | | | | | (5) | (| 5/18/2010 | Humana Common ⁽¹⁾ | 67,000 | | 67, | ,000 | D | | | | |
| Options ⁽⁸⁾ | \$32.7 | 02/24/2005 | | | A | | 75,000 | | (10) | (| 02/24/2012 | Humana Common ⁽¹⁾ | 75,000 | \$32.7 | 75, | 5,000 | | | | | |
| Options ⁽⁴⁾ | \$12.995 | | | | | | | | (6) | (| 3/13/2012 | Humana Common ⁽¹⁾ | 30,000 | | 30, | 30,000 | | | | | |
| Options ⁽⁴⁾ | \$9.26 | | | | | | | | (7) | (| 3/13/2013 | Humana Common ⁽¹⁾ | 50,000 | | 50, | ,000 | D | | | | |
| Options ⁽⁸⁾ | \$21.275 | | | | | | | | (9) | 0 | 2/24/2014 | Humana Common ⁽¹⁾ | 70,000 | | 70, | ,000 | D | | | | |

Explanation of Responses:

- 1. Each share of Common Stock contains a Right adopted on March 5, 1987, pursuant to the Company Rights Agreement, as amended and restated on February 14, 1996, and amended as of May 27, 1998 and March 1, 1999, which entitles holders of the Company's Common Stock, in the event certain specified events occur, to acquire 1/100 of a share of Series A Participating Preferred Stock at a price of \$145 per fractional share.
- 2. Reporting person sold stock at prices ranging from \$33.41 to \$33.58.
- 3. Shares held for the benefit of reporting person as of January 31, 2005 under the Humana Retirement & Savings Plan including a routine disposition of shares to fund an administrative fee assessment under a Tax-Conditioned Plan, both exempt under Rule 16b-3(c).
- 4. Right to buy pursuant to the Company's 1996 Stock Incentive Plan for Employees.
- 5. Incentive and Non-Qualified stock options granted to reporting person on 5/18/00, NQ options vesting in two increments on 5/18/02 and 5/18/03, and ISO's vesting in three increments from 5/18/01 to 5/18/03.
- 6. Incentive and Non-Qualified stock options granted to reporting person on 3/13/02, NQ options vesting in three increments from 3/13/03 to 3/13/05, and ISO's vesting in two increments on 3/13/04 and 3/13/05.
- 7. Incentive and Non-Qualified stock options granted to reporting person on 3/13/03, NQ options vesting in three increments from 3/13/04 to 3/13/06, and ISO's vesting on 3/13/06.
- 8. Right to buy pursuant to the Company's 2003 Stock Incentive Plan.

9. Incentive and Non-Qualified stock options granted to reporting person on 2/24/04, NQ options vesting in three increments from 2/24/05 to 2/24/07, and ISO's vesting on 2/24/07.

10. Incentive and Non-Qualified stock options granted to reporting person on 2/24/05, NQ options vesting in three increments from 2/24/06 to 2/24/08, and ISO's vesting on 2/24/08.

Remarks:

<u>Jonathan T. Lord, M.D.</u> <u>02/28/2005</u>

** Signature of Reporting Person Date

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

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.