SEC Form 4

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FORM 4

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 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

1. Name and Address of Reporting Person* <u>Felter John-Paul W.</u> (Last) (First) (Middle)							2. Issuer Name and Ticker or Trading Symbol <u>HUMANA INC</u> [HUM] 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2023									cable) or · (give title)	below)		vner specify	
500 W. MAIN ST.															SVP, Chief Accting Off & Cont. 6. Individual or Joint/Group Filing (Check Applicable					
(Street) LOUISV	'ILLE K	LE KY 40202				4. If Amendment, Date of Original Filed (Month/Day/Year)									 Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City) (State) (Zip)					Rı	Rule 10b5-1(c) Transaction Indication														
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Dat			Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Securitie Benefici Owned		es Forr ially (D) o Following (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	e Reporte Transact (Instr. 3		tion(s)			(Instr. 4)	
Humana Common 12/15/2							.023		М		114	Α	\$	\$0 2		.59		D		
Humana Common 12/15/2							.023		F		36 ⁽⁴⁾ D		\$46	3.58	223			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/E	n Date,	4. Transa Code (8)		on of		6. Date E: Expiratio (Month/D	n Dat	Amount of		f g Securit	D S (li	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
			Code		v	(A)	(A) (D) E			Expiration Date	Title	Amour or Numbe of Shares	ər							
Restricted Stock Units ⁽¹⁾	(1)								(2)		(2)	Humana Common	421			421		D		
Restricted Stock	(1)	12/15/2023			М			114	(3)		(3)	Humana	114		\$ <mark>0</mark>	229		D		

Explanation of Responses:

Units⁽¹⁾

1. Right to receive one share per restricted stock unit pursuant to the Company's 2019 Amended & Restated Stock Incentive Plan. Each restricted stock unit represents a contingent right to receive one share of Humana Inc. common stock, exempt under Rule 16b-3(d)(1) & (3).

2. Restricted stock units granted to reporting person on 8/1/2022, 33% of the award is vesting on 8/1/23, 8/1/24, and 8/1/25.

3. Restricted stock units granted to reporting person on 2/24/2023, 33% of the award is vesting on 12/15/23, 12/15/24, and 12/15/25.

4. Shares disposed of represent payment of tax liability resulting from vesting of Restricted Stock Units on 12/15/23.

John-Paul W. Felter

Common

** Signature of Reporting Person Date

12/19/2023

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.