FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
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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).

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* KATZ KAREN					2. Issuer Name and Ticker or Trading Symbol HUMANA INC [HUM]											Relationshi heck all app X Direc	licable)	. ,	on(s) to Issuer	
(Last)	•	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/30/2020											Officer (give title Other (spe below) below)				
500 W. N	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable									
(Street) LOUISVILLE KY 40202														Lir	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tab	le I - Non	-Deriv	ative	Sec	uritie	es A	cqu	ired,	Disp	osed (of, o	r Ben	eficia	lly Owne	:d			
Da				2. Trans Date (Month/I	Execution Day/Year) if any			ecution Date,		Transaction Dispose Code (Instr. 5)		rities Acquired (A) c ed Of (D) (Instr. 3, 4		(A) or 3, 4 an	Benefi	ies :ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership Instr. 4)	
							Code	v	Amount	(A) or (D)		Price	Transa	Transaction(s) (Instr. 3 and 4)			,iii3ti. 4)			
Humana Common																0		D		
		Т	able II - I (sed of				y Owned				
1. Title of Derivative Security (Instr. 3)	Conversion Date or Exercise (Month/Day/Year) is		Execution if any	xecution Date, any		4. Transaction Code (Instr. 8)				6. Date Exerci Expiration Da (Month/Day/Yo			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisabl		xpiration ate	Title	0 0	umber					
Restricted Stock Units ⁽¹⁾	(1)									(2)		(2)	Hun Com		590		590		D	
Restricted Stock Units ⁽³⁾	(3)	06/30/2020			A		78			(3)		(3)	Hun Com		78	\$384.15	164		D	
Restricted Stock Units ⁽¹⁾	(1)									(4)		(4)	Hun Com		453		453		D	

Explanation of Responses:

- 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. Initial award of \$165,000 worth of restricted stock units pursuant to the annual Director's Fee Program. 100% of the award will vest on 09/20/2020 and forfeited in its entirety if service is less than one year.
- 3. Director's cash fee elected to be converted into stock units, deferred at the election of the Reporting Person until his resignation of services as a director at which time the stock units will be payable in Humana Inc. common stock on a 1-for-1 basis, exempt pursuant to Rule 16(b)-3(d)(1).
- 4. 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) under Company's 2019 Amended & Restated Plan.100% of the award is vesting on 12/31/20.

Remarks:

Karen W. Katz

07/02/2020

** 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.