FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	e: 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

1. Name and Address of Reporting Person* Agrawal Vishal (Last) (First) (Middle) HUMANA INC. 500 W MAIN ST (Street) LOUISVILLE KY 40202					2. Issuer Name and Ticker or Trading Symbol HUMANA INC [HUM] 3. Date of Earliest Transaction (Month/Day/Year) 02/25/2019 4. If Amendment, Date of Original Filed (Month/Day/Year)								6. I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Chief Strategy Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)											Persor	•				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) Table II - Derivati					2A. Deemed Execution Date if any (Month/Day/Year) ive Securities Acquits, calls, warrants			3. Transact Code (In: 8) Code	Amount (A) or P posed of, or Benefic , convertible securitie			Price Price	5. Amou Securitie Benefici Owned F Reporter Transact (Instr. 3	nt of ses light of	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date	Execution Date if any (Month/Day/Yo	te, Tra	nsacti de (Ins	ion of		tive ties ed	Expiration D (Month/Day/	ate	of Sec ar) Under Deriva		of Securities Underlying Derivative Security (Instr. 3 and 4)		derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owi Fori Dire or li (I) (I	ership n: ct (D) direct nstr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
				Cod	de V	,	(A)	(D)	Date Exercisable	Expiration Date		Fitle	Amount or Number of Shares						
Options ⁽¹⁾	\$308.31								(1)	12/11/20		Humana Common	10,577		10,577		D		
Options ⁽²⁾	\$307.965	02/25/2019		А			5,388		(2)	02/25/20	ZD I	Humana Common	5,388	\$0	5,388		D		
Restricted Stock Units ⁽³⁾	(3)								(4)	(4)		Humana Common	2,433		2,433		D		
Restricted Stock Units ⁽⁵⁾	(5)	02/25/2019		А			1,218		(5)	(5)		Humana Common	1,218	\$0	1,218		D		

Explanation of Responses:

- 1. Right to buy pursuant to Company's 2011 Stock Incentive Plan. Incentive & Non-Qualified stock options granted to reporting person on 12/11/2018, vesting in three increments from 12/11/19 to 12/11/21.
- 2. Right to buy pursuant to Company's 2011 Stock Incentive Plan. Incentive & Non-Qualified stock options granted to reporting person on 02/25/2019, vesting in three increments from 02/25/20 to 02/25/22.
- 3. Right to receive one share per restricted stock unit pursuant to the Company's 2011 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).
- $4. \ Restricted \ stock \ units \ granted \ to \ reporting \ person \ on \ 12/11/2018, 33\% \ of \ the \ award \ is \ vesting \ on \ 12/11/2019, 12/11/2020 \ and \ 12/11/2021.$
- 5. Restricted stock units granted to reporting person on 02/25/2019, 33% of the award is vesting on 12/15/2019, 12/15/2020 and 12/15/2021.

Remarks:

Vishal Agrawal

03/01/2019

** 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.