	FORM	4	UNI	ED ST	ATE	S SE				EXCHA	NGE	CON	IMIS	SSION					
			Washington, D.C. 20549												OMB APPROVAL				
Section obligat	this box if no lo n 16. Form 4 or ions may contin tion 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									Esti	B Numbe mated av rs per res	erage burd	3235-0287 len 0.5					
transac contrac the pur securit intende defens	rchase or sale of ies of the issue ed to satisfy the	e pursuant to a r written plan for of equity r that is																	
1. Name and Address of Reporting Person* Renaudin George II						2. Issuer Name and Ticker or Trading Symbol HUMANA INC [HUM]								5. Relationship of Reporting Person(s (Check all applicable) Director				s) to Issuer 10% Owner	
					- L									Officer (give title Other (specify					
(Last) HUMAN)		3. Date of Earliest Transaction (Month/Day/Year)								,	below) Medicare & Medicaid							
500 W. MAIN STREET					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6								6. Individual or Joint/Group Filing (Check Applicable					
(Street)	SVILLE KY 40202					Line) Form filed by One Reportin Form filed by More than Or								rting Pers	son				
(City)	(S	tate)	(Zip)			Person													
		Tab	ole I - I	Non-Deri	vativ	e Sec	urities A	cquir	ed, C)isposed (of, or E	Benefic	cially	v Owne	d				
Da				2. Transaction Date (Month/Day/Ye		Execu if any	eemed ition Date, h/Day/Year)	3. Transactio Code (Instr 8)		4. Securities Acqu Disposed Of (D) (II				5. Amount of Securities Beneficially Owned Following Reported		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		Transact (Instr. 3 a	ion(s)			insti. 4)	
Humana Common 09/01/2					024			М		1,241	A	\$()	10,8	64 ⁽⁹⁾	I)		
Humana Common 09/01/202					024			F		303	D	\$352.	1398	10,5	61 ⁽¹¹⁾	I)		
Humana Common														4	96]		See Footnote ⁽¹	
			Table							sposed of s, converti				Owned					
Derivative Conversion Date E Security or Exercise (Month/Day/Year) i		Execu if any	eemed 4. ution Date, Transac code (In th/Day/Year) 8)			5. Number of Derivative Securities Acquired (A) or	6. Date Expira (Mont	ation D			t of ies ving ive Secur	[S (8. Price of Derivative Security (Instr. 5) Beneficia Owned Following		e (s i ally [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)		

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Options ⁽²⁾	\$510.2425							(2)	02/24/2030	Humana Common	4,162		4,162	D	
Options ⁽³⁾	\$367.21							(3)	02/21/2031	Humana Common	6,966		6,966	D	
Restricted Stock Units ⁽⁴⁾	(4)	09/01/2024		М			1,241	(5)	(5)	Humana Common	1,241	\$0	0	D	
Restricted Stock Units ⁽⁴⁾	(4)							(6)	(6)	Humana Common	230		230	D	
Restricted Stock Units ⁽⁴⁾	(4)							(7)	(7)	Humana Common	609		609	D	
Restricted Stock Units ⁽⁴⁾	(4)							(8)	(8)	Humana Common	719		719	D	
Phantom Stock Units ⁽¹⁰⁾	(10)							(10)	(10)	Humana Common	163		163	Ι	See Footnote ⁽¹⁰⁾

Explanation of Responses:

1. Shares held for the benefit of reporting person as of August 31, 2024 under the Humana Retirement Savings Plan including routine payroll deductions, quarterly dividend allocation, and a routine disposition of shares to fund an administrative fee assessment under a Tax-Conditioned Plan, exempt under Rule 16b-3(c).

2. Right to buy pursuant to Company's 2019 Amended & Restated Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting person on 02/24/2023, vesting in three annual increments from 2/24/24 to 2/24/26.

3. Right to buy pursuant to Company's 2019 Amended & Restated Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting person on 02/21/2024, vesting in three annual increments from 2/21/25 to 2/21/27.

4. 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).

5. Restricted stock units granted to reporting person on 9/1/2021, 100% of the award is vesting on 9/1/2024.

6. Restricted stock units granted to reporting person on 2/21/2022, 33% of the award is vesting on 12/15/22, 12/15/23, and 12/15/24.

7. Restricted stock units granted to reporting person on 10/1/2022, 100% of the award is vesting on 10/1/2025.

8. 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.

9. Includes 7,250 restricted stock units representing a contingent right to receive one share of Humana Inc. common stock, exempt under Rule 16b-3(d)(1)&(3) under the Company's 2019 Amended & Restated Plan.

10. Phantom Stock Units held for the benefit of reporting person as of August 31, 2024 based on the value of Humana common stock on a 1-for-1 basis, under the Humana Retirement Equalization Plan. Contributions are made once annually and reported within 2 business days of the contribution date with the transaction code "J". The ending number of units reflects normal fluctuation due to changes in stock price.

11. Shares disposed of represent payment for tax liability for Restricted Stock vesting occurring on 9/1/24.

George Renaudin II

** Signature of Reporting Person

09/04/2024 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.