

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL	
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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>Renaudin George II</u> _____ (Last) (First) (Middle) HUMANA INC. 500 W. MAIN STREET _____ (Street) LOUISVILLE KY 40202 _____ (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 02/01/2023	3. Issuer Name and Ticker or Trading Symbol <u>HUMANA INC [HUM]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) President, Medicare & Medicaid	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Humana Common	0	D	
Humana Common	1,364	I	See Footnote ⁽¹⁾

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				
Restricted Stock Units ⁽²⁾	(3)	(3)	Humana Common 241	0	D	
Restricted Stock Units ⁽²⁾	(4)	(4)	Humana Common 1,241	0	D	
Restricted Stock Units ⁽²⁾	(5)	(5)	Humana Common 459	0	D	
Restricted Stock Units ⁽²⁾	(6)	(6)	Humana Common 609	0	D	
Phantom Stock Units ⁽⁷⁾	(7)	(7)	Humana Common 418	0	I	See Footnote ⁽⁷⁾

Explanation of Responses:

- Shares held for the benefit of reporting person as of January 23, 2023 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).
- 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).
- Restricted stock units granted to reporting person on 2/22/2021, 33% of the award is vesting on 12/15/21, 12/15/22, and 12/15/23. Amount reported is what remains unvested.
- Restricted stock units granted to reporting person on 9/1/2021, 100% of the award is vesting on 9/1/2024.
- 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. Amount reported is what remains unvested.
- Restricted stock units granted to reporting person on 10/1/2022, 100% of the award is vesting on 10/1/2025.
- Phantom Stock Units held for the benefit of reporting person as of January 23, 2023 based on the value of Humana common stock on a 1-for-1 basis, under the Humana Retirement Equalization Plan. The ending number of units reflects normal fluctuation due to changes in stock price.

George Renaudin II

02/01/2023

** 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 5 (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.