FORM 4

obligations may continue. See Instruction 1(b).

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	STAT

TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Zipperle Cynthia H (Last) (First) (Middle) HUMANA INC. 500 WEST MAIN ST				Issuer Name and Ticker or Trading Symbol HUMANA INC [HUM] 3. Date of Earliest Transaction (Month/Day/Year) 03/25/2021								Relationship of Reporting Person(s) to Issuer check all applicable) Director 10% Owner X Officer (give title below) SVP, Chief Acct Officer & Cont						
(Street) LOUISV (City)		tate)	40202 (Zip)		,	4. If Amendment, Date of Original Filed (Month/Day/Year)						Li	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of :	Security (Ins		le I - No	n-Deriv		_	Uritie Deem		quired,	Dis		of, or Be		ally Owne		6. Ow	nership	7. Nature of
	coounty (inc	5,		Date (Month/Day/Year)		Execution Date,		Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4				es ally	Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership		
						(Monthly)			Code	v	Amount	ount (A) or (D)		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Humana	Common													4,4	147	D		
Humana Common												898				See Footnote ⁽¹⁾		
		Т	able II -									, or Ben ible secu		y Owned				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execut Security or Exercise (Month/Day/Year) if any		3A. Deem	on Date, Transact Code (Ins		saction of E					7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			O. Niversia	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		11. Nature	
				n Date,	Code (I		of Deriv Secu Acqu (A) of Dispo of (D)	rative rities ired r osed)	6. Date Ex Expiration (Month/Da	n Date	•	Amount of Securities Underlying Derivative	f g Security	8. Price of Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followir Reporte Transac	ve es ially ng ed etion(s)	Ownershi Form: Direct (D) or Indirect (I) (Instr.	p of Indirect Beneficial Ownership t (Instr. 4)
			if any	n Date, ay/Year)	Code (I		of Deriv Secu Acqu (A) of Dispo of (D)	rative rities ired r osed)	Expiration	n Dateay/Yea	•	Amount of Securities Underlying Derivative	f g Security	Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followir Reporte Transac	ve es ially ng ed etion(s)	Form: Direct (D) or Indirect	p of Indirect Beneficial Ownership t (Instr. 4)
Restricted Stock Units ⁽²⁾			if any	n Date, ay/Year)	Code (II	nstr.	of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5	rative rities ired r osed)	Expiration (Month/Da	n Dateay/Yea	ear)	Amount of Securities Underlying Derivative (Instr. 3 ar	Security or Number of	Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followir Reporte Transac	ve es ially ng did ition(s)	Form: Direct (D) or Indirect	p of Indirect Beneficial Ownership t (Instr. 4)
Stock	Security		if any	n Date, ay/Year)	Code (II	nstr.	of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5	rative rities ired r osed)	Expiration (Month/Da	n Dateay/Yea	expiration	Amount of Securities Underlying Derivative (Instr. 3 and Title	g Security d 4) Amount or Number of Shares	Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng ed et ion(s)	Form: Direct (D) or Indirec (I) (Instr.	p of Indirect Beneficial Ownership t (Instr. 4)
Stock Units ⁽²⁾ Restricted Stock	Security (2)		if any	n Date, ay/Year)	Code (II	nstr.	of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5	rative rities ired r osed)	Expiration (Month/Da	n Dateay/Yea	Expiration Date	Amount of Securities Underlying Derivative (Instr. 3 ar Title Humana Common	Amount of Shares	Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followin Reporte Transac (Instr. 4)	ve es idally ng id distion(s)	Form: Direct (D) or Indirect (I) (Instr.	p of Indirect Beneficial Ownership t (Instr. 4)

Explanation of Responses:

- 1. Shares held for the benefit of reporting person as of February 28, 2021under 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 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).
- 3. 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).
- $4. \ Restricted \ stock \ units \ granted \ to \ reporting \ person \ on \ 02/25/19, \ 33\% \ of \ the \ award \ is \ vesting \ on \ 12/15/19, \ 12/15/20, \ and \ 12/15/21.$
- $5. \ Restricted \ stock \ units \ granted \ to \ reporting \ person \ on \ 02/24/2020, \ 33\% \ of \ the \ award \ is \ vesting \ on \ 12/15/20, \ 12/15/21, \ and \ 12/15/22.$
- $6. \ Restricted \ stock \ units \ granted \ to \ reporting \ person \ on \ 02/22/2021, \ 33\% \ of \ the \ award \ is \ vesting \ on \ 12/15/21, \ 12/15/22, \ and \ 12/15/23.$
- 7. Phantom Stock Units held for the benefit of reporting person as of March 25, 2021 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

Remarks:

Cynthia H. Zipperle

03/26/2021

** 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.