**HUMANA INC** Form 4 March 10, 2017

## FORM 4

#### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Fleming William Kevin	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)	HUMANA INC [HUM]  3. Date of Earliest Transaction	(Check all applicable)			
500 WEST MAIN STREET	(Month/Day/Year) 03/08/2017	Director 10% OwnerX_ Officer (give title Other (special below)  President, Hlthcare Svc Sgmt			
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)			
LOUISVILLE, KY 40202		_X_ Form filed by One Reporting Person Form filed by More than One Reportin Person			

LOUIS VILLE, IX 1 40202	

(City)	(State) (	Zip) Tabl	e I - Non-D	Perivative Securities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  (A) or Amount (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Humana Common					10,752	D	
Humana Common					119	I	See Footnote (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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 $\label{thm:convertible} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$ 

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number or Derivative Securities Acquired (a or Disposed (D) (Instr. 3, 4, and 5)	A) d of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options (2)	\$ 164.645						(2)	02/24/2022	Humana Common	7,627
Options (3)	\$ 167.805						(3)	02/18/2023	Humana Common	12,015
Options (4)	\$ 217.415	03/08/2017		A	20,497		<u>(4)</u>	03/08/2024	Humana Common	20,497
Restricted Stock Units (5)	\$ 0 (5)						(6)	(6)	Humana Common	3,341
Restricted Stock Units (5)	\$ 0 (5)						<u>(7)</u>	<u>(7)</u>	Humana Common	1,739
Restricted Stock Units (5)	\$ 0 (5)	03/08/2017		A	4,713		<u>(8)</u>	<u>(8)</u>	Humana Common	4,713
Phantom Stock Units	<u>(9)</u>						(9)	<u>(9)</u>	Humana Common	23

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Fleming William Kevin 500 WEST MAIN STREET LOUISVILLE, KY 40202

President, Hlthcare Svc Sgmt

## **Signatures**

William K. 03/10/2017 Fleming

\*\*Signature of Date
Reporting Person

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## **Explanation of Responses:**

- \* 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).
- Shares held for the benefit of reporting person as of February 28, 2017 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 2011 Stock Incentive Plan. Non-Qualified stock options granted to reporting person on 02/24/2015, vesting in three increments from 02/24/2016 to 02/24/2018.
- (3) Right to buy pursuant to Company's 2011 Stock Incentive Plan. Non-Qualified stock options granted to reporting person on 02/18/2016, vesting in three increments from 02/18/2017 to 02/18/2019.
- (4) Right to buy pursuant to Company's 2011 Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting person on 03/08/2017. 12,998 options vesting in three annual increments, and 7,499 options fully vest three years from the date of grant.
- (5) 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).
- (6) Restricted stock units granted to reporting person on 02/24/15, 100% of the award is vesting on 02/24/2018.
- (7) Restricted stock units granted to reporting person on 02/18/16, 33% of the award is vesting on 12/15/16, 12/15/2017 and 12/15/2018.
- (8) Restricted stock units granted to reporting person on 03/08/17, 2,989 shares vesting in three annual increments, and 1,724 shares fully vest three years from the date of grant.
- Phantom Stock Units held for the benefit of reporting person as of February 28, 2017 based on the value of Humana common stock on a (9) 1-for-1 basis, under the Humana Retirement Equalization Plan. The ending number of units reflects normal fluctuation due to changes in stock price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.