Edgar Filing: BEVERIDGE, ROY A - Form 4

BEVERIDO Form 4	GE, ROY A										
August 08,	2018										
FORM	ЛЛ								OMB AP	PROVAL	
	UNITEL) STATES		RITIES ashingtor				OMMISSION	OMB Number:	3235-0287	
Check t	ngor			_					Expires:	January 31, 2005	
Subject to Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per response		
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17	(a) of the	Public U	Jtility Ho	lding Co	mpar	•	Act of 1934, 935 or Section	L		
(Print or Type	Responses)										
BEVERIDGE, ROY A Symb			Symbol	er Name ar ANA INC		r Trad		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chec.						k all applicable)		
(Mont				n/Day/Year)/2018				Director 10% Owner _X Officer (give title Other (specify elow) below) Chief Medical Officer			
	(Street)			nendment, I onth/Day/Ye	-	al	A	5. Individual or Joi Applicable Line) X_ Form filed by O	ne Reporting Per	son	
	LLE, KY 40202						Ē	Form filed by Mo Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tal	ble I - Non	-Derivative	e Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned	
Security (Month/Day/Year) Execution Date, if				Code	4. Securit orDisposed (Instr. 3, 4	of (D))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price	(Instr. 3 and 4)	1		
Humana Common	08/06/2018			М	1,291	А	\$ 81.795	15,274	D		
Humana Common	08/06/2018			F	328	D	\$ 322.72 (10)	⁵ 14,946	D		
Humana Common	08/06/2018			М	607	А	\$ 164.64	5 15,553	D		
Humana	08/06/2018			F	310	D	\$ 322.72	5 15,243	D		

Common

Humana

Common

(10)

D

Edgar Filing: BEVERIDGE, ROY A - Form 4

Humana Common 08/06/2018 \$ 14,306 D 324.2526 15,243 D (11)

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

S

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owne	d
(e.g., puts, calls, warrants, options, convertible securities)	

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)	orDeriv Secu Acqu or Di (D)	rivative Expirati curities (Month aquired (A) Disposed of) istr. 3, 4,		Date Exercisable and biration Date onth/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 (1)	\$ 81.795	08/06/2018		М		1,291	<u>(1)</u>	06/17/2020	Humana Common	1,291	
Options (2)	\$ 164.645	08/06/2018		М		14,913	(2)	02/24/2022	Humana Common	14,913	
Options (3)	\$ 167.805						(3)	02/18/2023	Humana Common	14,764	
Options (4)	\$ 217.415						<u>(4)</u>	03/08/2024	Humana Common	15,997	
Options (5)	\$ 268.47						(5)	02/19/2025	Humana Common	4,415	
Restricted Stock Units <u>(6)</u>	<u>(6)</u>						(7)	(7)	Humana Common	1,093	
Restricted Stock Units <u>(6)</u>	<u>(6)</u>						(8)	(8)	Humana Common	2,836	
Restricted Stock Units <u>(6)</u>	<u>(6)</u>						<u>(9)</u>	<u>(9)</u>	Humana Common	1,024	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BEVERIDGE, ROY A HUMANA INC. 500 WEST MAIN STREET LOUISVILLE, KY 40202			Chief Medical Officer					
Signatures								
Roy A								

Roy A. 08/08/2018 Beveridge Date

**Signature of Reporting Person

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).
- Right to buy pursuant to Humana Inc.'s 2011 Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting (1)person on 06/17/13, vesting in three increments from 06/17/14 to 06/17/16.
- Right to buy pursuant to Humana Inc.'s 2011 Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting (2)person on 02/24/15, vesting in three increments from 02/24/16 to 02/24/18.
- Right to buy pursuant to Company's 2011 Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting person (3) on 02/18/16, vesting in three increments from 02/18/17 to 02/18/19.
- Right to buy pursuant to Company's 2011 Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting person (4) on 03/08/2017. 10,998 options vesting in three annual increments, and 4,999 options fully vest three years from the date of grant.
- Right to buy pursuant to Company's 2011 Stock Incentive Plan. Incentive and Non-Qualified stock options granted to reporting person (5) on 02/19/18, vesting in three increments from 02/19/19 to 02/19/21.
- Right to receive one share per restricted stock unit pursuant to the Company's 2011 Stock Incentive Plan. Each restricted stock unit (6) 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 02/18/16, 33% of the award is vesting on 12/15/16, 12/15/17, and 12/15/18. (7)
- Restricted stock units granted to reporting person on 03/08/2017, 2,529 shares vesting in three annual increments on 12/15/17, 12/15/18, (8) and 12/15/19. 1,149 shares fully vest three years from the date of grant.
- Restricted stock units granted to reporting person on 02/19/18, 33% of the award is vesting on 12/15/18, 12/15/19, and 12/15/20. (9)
- Shares swapped for payment of purchase price on stock option exercise using fair market value on August 3, 2018 pursuant to Humana (10)Inc.'s 2011 Stock Incentive Plan.
- (11) Shares sold at prices ranging from \$323.49 to \$325.08. Price reported is weighted average sales 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.