Edgar Filing: WELLPOINT INC - Form 4

WELL DOINT INC

Form 4	1 INC												
October 03, 2	2008												
FORM	SECUR	ITIFS		ND FXC	'HA'	NGE	COMMISSION	OMB APPROVAL					
	UNITED	SIAIL				D.C. 205		UL		OMB Number:	3235-0287		
Check thi if no long		······································						Expires:	January 31,				
subject to Section 1 Form 4 or	6. SIAIE	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940								Estimated a burden hou	Estimated average burden hours per response 0.5		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17									·			
(Print or Type R	Responses)												
1. Name and Address of Reporting Person <u>*</u> Miller Martin L			2. Issuer Name and Ticker or Trading Symbol WELLPOINT INC [WLP]					g	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of						(Chec	ck all applicable	e)		
120 MONUMENT CIRCLE			(Month/Day/Year) 10/01/2008						Director 10% Owner Officer (give title Other (specify below) below) below) SVP & Chief Accounting Officer				
				If Amendment, Date Original led(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
INDIANAP	OLIS, IN 46204								Form filed by M Person	More than One Ro	eporting		
(City)	(State)	(Zip)	Table	e I - Nor	1-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	c) Execution any	emed on Date, if /Day/Year)	Code (Instr.	8)	4. Securit nAcquired Disposed (Instr. 3, Amount	l (A) o l of (D)	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)		
Common Stock	10/01/2008			А		2,263 (1)	A	\$0	2,263	D			

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

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 Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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 of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	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
Employee Stock Option (Right to Buy)	\$ 47.5	10/01/2008		A	18,101	(2)	10/01/2015	Common Stock	18,101

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 8	Director	10% Owner	Officer	Other			
Miller Martin L 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204			SVP & Chief Accounting Officer				
Signatures							
Non art I. Duna all							

Nancy L. Purcell, Attorney-in-fact 10/03/2008

**Signature of Reporting Person

Date

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).

(1) Represents restricted share units. Restrictions lapse on 754 shares each on 10/1/09 and 10/1/10, and 755 shares on 10/1/11.

(2) Exercisable in one installment of 3,016 on 4/1/09 and five installments of 3,017 each on 10/1/09, 4/1/10, 10/1/10, 4/1/11 and 10/1/11.

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.