Edgar Filing: WELLPOINT INC - Form 4/A

WELLPOIN	T INC										
Form 4/A											
March 03, 20)05										
FORM									OMB AF	PPROVAL	
	UNITE	D STATES		RITIES Al shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi				0 /					Expires:	January 31,	
subject to state and the state of the state				GES IN I	BENEF	ICIA	LOW	NERSHIP OF		2005	
Section 16.				SECUR	ITIES				Estimated average burden hours per		
	Form 4 or						response 0.5				
Form 5	• • • • •						-	e Act of 1934,			
obligation may cont		17(a) of the	Public U	tility Hold	ing Con	npany	y Act of	1935 or Section	1		
See Instru		30(h)) of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Print or Type F	Responses)										
1 Name and A	ddrass of Paparti	ng Derson *	2.1	NT 1	m: 1			5 Palationship of	Deporting Der	on(s) to	
				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
DUSHIWIL			Symbol			a					
			WELLI	POINT IN	C[wLP]		(Checl	k all applicable	;)	
(Last)	(First)	(Middle)		f Earliest Tra	ansaction						
		F	(Month/E	-				X_ Director Officer (give		Owner er (specify	
120 MONU.	MENT CIRCI	LE	12/01/2	004				below)	below)	ci (specify	
	(Street)		4. If Ame	ndment, Dat	e Origina	1		6. Individual or Jo	int/Group Filin	1g(Check	
				nth/Day/Year)	-			Applicable Line)	rr	8(
			12/03/2	-				_X_ Form filed by C			
INDIANAP	OLIS, IN 4620	04						Form filed by M Person	lore than One Re	porting	
	(54-4-)	(7:)									
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution D			3. Transactio		spose	d of (D)	5. Amount of Securities	6. Ownership Form: Direct	Indirect		
(Instr. 3) any (Month/Day/Year)			Code (Instr. 8)	(Instr. 3,	4 and	5)	Beneficially Owned	× /	Beneficial Ownership		
		(Monun	Day/Teal)	(11150. 0)				Following	(Instr. 4)	(Instr. 4)	
						(1)		Reported			
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	12/01/2004			A <u>(1)</u>	15	А	\$ 109.1	7,579 <u>(2)</u>	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)	4. Transact Code (Instr. 8)	ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, an 7 (A)	ĺ.	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BUSH WILLIAM H T 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204	Х							
Signatures								
Nancy Purcell, Attorney-in-fact	03/0	3/2005						

**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) Exempt under Rule 16b-3(d)(1)
- (2) This Form is being amended to correct the number of shares listed in column 5. The original number in column 5 was overstated by 9,115 shares.

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.