Edgar Filing: WELLPOINT INC - Form 4

WELLPOIN Form 4										
May 18, 200	ПЛ								PPROVAL	
	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-0287	
Subject to Section 16. Form 4 or Form 5 obligations may continue Fort 16. Filed pursuant to Section 17(a) of the Pull				CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES action 16(a) of the Securities Exchange Act of 1934, ablic Utility Holding Company Act of 1935 or Sectio f the Investment Company Act of 1940					January 31, 2005 average urs per . 0.5	
1(b).										
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> JOBE WARREN Y			2. Issuer Name and Ticker or Trading Symbol WELLPOINT INC [WLP]			5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)				-	(Check all applicable)			
120 MONUMENT CIRCLE			(Month/Day/Year) 05/16/2006			X_ Director 10% Owner Officer (give title Other (specify below)				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	POLIS, IN 46204						Person			
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivativ	e Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or d of (D) 4 and 5) (A) or	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)	
Reminder: Rep	port on a separate lin	e for each cla	ass of sec	urities bene	ficially ov	vned directly	or indirectly.			
					infor requ	mation con ired to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Instr.

	Derivative Security				(A) or Disposed (D) (Instr. 3, and 5)						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units <u>(1)</u>	\$ 0 <u>(2)</u>	05/16/2006	А		3,430		(3)	(3)	Common Stock	3,430	\$ 72

Reporting Owners

Reporting Owner Name / Address				
Treporting of their trainer trainers	Director	10% Owner	Officer	Other
JOBE WARREN Y 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204	Х			
Signatures				

Nancy Purcell,	
Attorney-in-fact	05/18/2006
**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) The phantom stock units were accrued under the WellPoint, Inc. ("Company") Board of Directors Deferred Compensation Plan ("the Plan").
- (2) The Conversion or Exercise Price of the Derivative Security is 1-for-1
- The phantom stock units shall be payable in Company common stock upon the first to occur of (a) five years from the date of grant or (b)(3) the date the Reporting Person ceases to be a member of the Registrant's board of directors; unless a later date is designated in the Reporting Person's election made under the Plan in accordance with the terms of the Plan.

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.