Edgar Filing: WELLPOINT INC - Form 4

WELLPOINT Form 4										
May 18, 2007	Л		CECH							PPROVAL
	UNITED	STATES						E COMMISSIO	N OMB Number:	3235-0287
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed pu Section 17	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ction 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						Estimated burden hou response	urs per	
(Print or Type Ro	esponses)									
1. Name and Address of Reporting Person <u>*</u> LISS VICTOR S			2. Issuer Name and Ticker or Trading Symbol WELLPOINT INC [WLP]			5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 120 MONUMENT CIRCLE			 Date of Earliest Transaction (Month/Day/Year) 05/16/2007 			(Check all applicable) <u>X</u> Director Officer (give title below) <u>10%</u> Owner <u>10%</u> Owner <u>below</u>)				
(Street) INDIANAPOLIS, IN 46204			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 Person 				
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivat	ive Secu	rities A	Acquired, Disposed	of, or Beneficia	lly Owned
	. Transaction Date Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	Dispos (Instr.	red (A) c sed of (D 3, 4 and (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: Repo	rt on a separate lind	e for each cl	ass of sec	urities bene	Per info req dis	rsons w ormatio juired to	vho res on cont o respo	or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	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		(D)	Disposed of D) Instr. 3, 4,							
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units <u>(1)</u>	\$ 0 <u>(2)</u>	05/16/2007	А		2,946		(3)	(3)	Common Stock	2,946	\$ 84

Reporting Owners

Reporting Owner Name / Address					
	Director	10% Owner	Officer	Other	
LISS VICTOR S 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204	Х				
Signatures					

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Nancy Purcell,	
Attorney-in-fact	05/18/2007
**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).
- The phantom stock units were accrued under the WellPoint, Inc. ("Company") Board of Directors Deferred Compensation Plan (the (1) "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 Company'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.