# Edgar Filing: WELLPOINT INC - Form 4

WELLPOIN	NT INC										
Form 4 December 0	7 2007										
									OMB AF	PROVAL	
FORM	UNITED	STATES		RITIES A			NGE C	COMMISSION	OMB Number:	3235-0287	
Check th if no lon	cor			U					Expires:	January 31,	
subject t Section Form 4 o	o SIAIEN 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES							Estimated average burden hours per response 0.		
Form 5 obligation may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the H	Public U		ding Cor	npan	y Act of	e Act of 1934, 1935 or Section 0			
(Print or Type	Responses)										
WATTS JOHN S JR Syn			Symbol	2. Issuer Name <b>and</b> Ticker or Trading ymbol VELLPOINT INC [WLP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (	Middle)	3. Date of	of Earliest T	ransaction			Спеск	all applicable	)	
(M				Month/Day/Year) 12/05/2007				Director 10% Owner X Officer (give title Other (specify below) below) EVP			
	(Street)			endment, D onth/Day/Yea	-	.1		6. Individual or Joi Applicable Line) _X_ Form filed by Ou Form filed by Mo	ne Reporting Per	rson	
INDIANAI	POLIS, IN 46204							Person		porting	
(City)	(State)	(Zip)	Tab	le I - Non-J	Derivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr. 3, 4 and 5) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(Instr. 4)		
Common Stock	12/05/2007			М	39,999	A	\$ 76.59	167,573.9608	D		
Common Stock	12/05/2007			S <u>(1)</u>	39,999	D	\$ 83.87	127,574.9608	D		
Common Stock	12/06/2007			М	16,666	А	\$ 80.81	144,240.9608	D		
Common Stock	12/06/2007			S	16,666	D	\$ 85	127,574.9608	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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#### 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)

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 Derivative Expiration Securities (Month/Day Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate Underlying		Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 76.59	12/05/2007		М	39,999	(2)	03/01/2016	Common Stock	39,999
Employee Stock Option (Right to Buy)	\$ 80.81	12/06/2007		М	16,666	<u>(3)</u>	03/01/2017	Common Stock	16,666

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
WATTS JOHN S JR 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204			EVP			
Signatures						
Nancy Purcell						

Nancy Purcell, 12/07/2007 Attorney-in-fact 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).
- The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 13, (1)2007.

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Options exercised vested as follows: 13,333 each on 9/1/06, 3/1/07 and 9/1/07; of the remaining 40,001 options, 13,333 vests on 3/1/08 and 13,334 each vests on 9/1/08 and 3/1/09.

(3) Options exercised vested 9/1/07; of the remaining 83,334 options, 16,666 vests on 3/1/08 and 16,667 each vests on 9/1/08, 3/1/09, 9/1/09 and 3/1/10.

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.