Edgar Filing: WELLPOINT INC - Form 4/A

| WELLPOIN | IT INC | | | | | | | | | | | |
|------------------------------|---------------------|------------------------|------------------------|--------------------------------|---------------------|---|--------------------|---|----------------------------------|--------------|--|--|
| Form 4/A | | | | | | | | | | | | |
| March 30, 20 | 006 | | | | | | | | | | | |
| FORM | ΙΔ | | | | | | | | OMB AF | PROVAL | | |
| | UNITE | D STATES | | RITIES A shington, | | | NGE C | COMMISSION | OMB Number: | 3235-0287 | | |
| Check th | | | | | | | | | Expires: | January 31, | | |
| if no long subject to | | EMENT O | F CHAN | GES IN BENEFICIAL OWNERSHIP O | | | | NERSHIP OF | Estimated average | | | |
| Section 16. | | | | SECURITIES | | | | | burden hours per | | | |
| Form 4 c | | | | | | | | | response | 0.5 | | |
| Form 5 obligatio | | | | | | | • | e Act of 1934, | | | | |
| may con | | | | • | • | · · | • | f 1935 or Section | 1 | | | |
| See Instr 1(b). | ruction | 30(h) | of the In | vestment | Compar | іу Ас | t of 194 | 10 | | | | |
| (Print or Type] | Responses) | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | Address of Reportin | ng Person [*] | 2. Issue | i tune und i tener of i tuding | | | | • | onship of Reporting Person(s) to | | | |
| DeVeydt Wayne S Symbol WELLP | | | | LPOINT INC [WLP] | | | | Issuer | | | | |
| | | | | | | | | (Check all applicable) | | | | |
| (Last) | (First) | (Middle) | 3. Date o | f Earliest T | ransaction | | | (| | , | | |
| | | | | h/Day/Year) | | | Director 10% Owner | | | | | |
| 120 MONUMENT CIRCLE 03/01/2 | | | | 2006 | | | | XOfficer (give titleOther (specify below) below) SVP & Chief Accounting Officer | | | | |
| | | | | | | | | | - | | | |
| | | | endment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | | | | |
| | | | | Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| INDIANAF | POLIS, IN 4620 | 4 | 03/03/2 | 000 | | | | Form filed by M Person | | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | | |
| 1.Title of | | | | 3.4. Securities Acquired | | | | 5. Amount of | 6. | 7. Nature of | | |
| Security | (Month/Day/Year | | n Date, if | (A) or Disposed of (D) | | | Securities | Ownership | Indirect | | | |
| (Instr. 3) | | any (Month/F | Dav/Year) | Code (Instr. 8) | (Instr. 3, 4 and 5) | | | Beneficially Owned | Form: Direct (D) or | Ownership | | |
| | | (111011111)2 | (u), 10u1) | (1115111-0) | | | | Following | Indirect (I) | (Instr. 4) | | |
| | | | | | | (A) | | Reported | (Instr. 4) | | | |
| | | | | | | or | | Transaction(s) (Instr. 3 and 4) | | | | |
| ~ | | | | Code V | Amount | (D) | Price | (msu: 5 and 4) | | | | |
| Common Stock | 03/01/2006 | | | А | 7,943 (1) | А | \$ 76.59 | 58,289.5477 | 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)

| 1. Title c Derivativ Security (Instr. 3) | ve Conversion or Exercise | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transact Code (Instr. 8) | 5. iorNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | Date | Amou Unde Secur | le and unt of rlying rities (1, 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|------------------------------|---|---|--------------------------------------|---|---------------------|--------------------|-----------------------|--|---|--|
| | | | | Code N | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

**Signature of Reporting Person

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|--------------------------------|-------|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | |
| DeVeydt Wayne S 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204 | | | SVP & Chief Accounting Officer | | | | | |
| Signatures | | | | | | | | |
| Nancy Purcell, Attorney-in-fact | 03/3 | 0/2006 | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) This Form is being amended to correct the number of shares of common stock reported on March 3, 2006 because the original number was under-reported by 443 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.