

WELLPOINT INC  
Form 3  
March 28, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Braly Angela F		(Month/Day/Year)	WELLPOINT INC [WLP]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		03/16/2005		
120 MONUMENT CIRCLE			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below)	
INDIANAPOLIS,Â INÂ 46204			EVP	
(City)	(State)	(Zip)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	21,536 <sup>(1)</sup>	D	Â
Common Stock	1,760	I	401(k)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Deferred Comp Stock Units	Â (2)	Â (2)	Common Stock	4,830	\$ 0	D	Â
Deferred Comp Stock Units	Â (3)	Â (3)	Common Stock	201	\$ 0	D	Â
Deferred Comp Stock Units	Â (4)	Â (4)	Common Stock	385	\$ 0	D	Â
Deferred Comp Stock Units	Â (5)	Â (5)	Common Stock	2,224	\$ 0	D	Â
Employee Stock Option (right to buy)	08/07/2002	02/06/2012	Common Stock	9,635	\$ 51.21	D	Â
Employee Stock Option (right to buy)	08/05/2003	02/04/2013	Common Stock	7,256	\$ 55.1	D	Â
Employee Stock Option (right to buy)	07/26/2004	01/25/2014	Common Stock	1,218	\$ 82.06	D	Â
Employee Stock Option (right to buy)	02/11/2004	08/10/2013	Common Stock	22,320	\$ 64.11	D	Â
Employee Stock Option (right to buy)	08/05/2003	02/04/2013	Common Stock	7,624	\$ 55.1	D	Â
Employee Stock Option (right to buy)	07/26/2004	01/25/2014	Common Stock	23,582	\$ 82.06	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Braly Angela F 120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204	Â	Â	Â EVP	Â

## Signatures

Nancy L. Purcell,  
Attorney-in-Fact

03/28/2005

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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) Includes 20,000 restricted shares; 50% vests 2/24/07 and the remaining 50% vests on 2/24/08.

(2) These shares are fully vested.

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- (3) All shares vest 3/15/06.
- (4) 50% of the shares vest on 3/15/06 and the remaining 50% vests on 3/15/07.
- (5) 50% of the shares vest on 01/26/06 and the remaining 50% vests on 01/26/07.

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.