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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration 1/1/2004

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name Alston & Bird LLP

Address 601 Pennsylvania Avenue, NW - North Building, 10th Floor

City Washington State DC Zip 20004-2601

4. Principal place of business (if different from line 3)

City Atlanta State/Zip (or Country) GA 30309

5. Telephone number and contact name

(202) 756-3342 Contact Jonathan M. Winer E-mail (optional) jwiner@

6. General description of registrant's business or activities

Law firm

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.*  *Self*

7. Client name Anthem, Inc.

Address 120 Monument Circle

City Indianapolis State IN Zip 46204

8. Principal place of business (if different from line 7)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

Health care provider

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any individual in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
Thomas G. Schendt	
John R. Hickman	

Form LD-1 (Rev. 04/03)

Registrant Name Alston & Bird LLP Client Name Anthem, Inc.

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p

HCR

12. Specific lobbying issues (current and anticipated)

Regulations implementing guidance concerning health savings accounts.

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the regi  
a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activit

No ⇨ Go to line 14.

Yes ⇩ Complete the rest of this section for each entity matchin  
criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or coun

**FOREIGN ENTITIES**

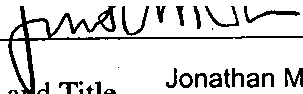
14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsi  
activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the ou  
of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ⇩ Complete the rest of this section for ea  
matching the criteria above, then sign a  
registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature  Date 5/13/2007  
Printed Name and Title Jonathan M. Winer, Partner

Form LD-1 (Rev. 04/03)