## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  WATT JANET M								2. Issuer Name <b>and</b> Ticker or Trading Symbol MOLINA HEALTHCARE INC [ MOH ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title X below)  Settlor-Molina Siblings Trust					
(Last) (First) (Middle) C/O MOLINA HEALTHCARE, INC. ONE GOLDEN SHORE DRIVE							3. Date of Earliest Transaction (Month/Day/Year) 12/05/2005															
(Street) LONG BEACH CA 90802							4. If Amendment, Date of Original Filed (Month/Day/Year) 12/05/2005  6. Individual or Joint/Group Filing (Check A Line)  X Form filed by One Reporting Pers Form filed by More than One Rep											son				
(City)		(Stat	•	Zip)																		
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ction	ion 2A. Deemed Execution Dat			d Date,	3. Transa Code (1 8)	ction	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				or 5. Amount of		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount		(A) or (D)	Pric	е	Transaction(s) (Instr. 3 and 4)				(111501.4)				
Common Stock 12/0										J <sup>(1)</sup>		60,837		A	\$0		522,442			D		
Common Stock 12						12/05/2005					<b>J</b> (2)		460		A	\$ <mark>0</mark>		522,904			D	
Common Stock																		121	1,937			See Footnote <sup>(3)</sup>
Common Stock																		41	,956			See footnote <sup>(4)</sup>
Common Stock																		14	,681		D <sup>(5)</sup>	
			Та										sed of, onvertib					Owned				
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Da or Exercise (Month/Day/Year) if any			ned n Date,	4. Transaction Code (Instr. 8)		5	5. Nun of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	nber ative ities red sed 3, 4		Exercison Dat Day/Ye	sable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of Title Shares		d of s g e instr. 3	t		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. Transfer without consideration from MRM GRAT 903/2.
- 2. Transfer without consideration from the Mary R. Molina Living Trust.
- 3. The shares are owned by the Janet Marie Watt Trust (1995), of which Ms. Watt is a co-trustee and beneficiary.
- 4. The shares are owned by the Molina Children's Trust for Janet M. Watt (1997), of which Ms. Watt is a co-trustee and beneficiary.
- 5. The shares are owned by Ms. Watt and her spouse as community property.

/s/ Janet M. Watt, by Karen Calhoun, Attorney-in-Fact

12/09/2005

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.