FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

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

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

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

Name and Address of Reporting Person*     WATT JANET M					2. Issuer Name and 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 V Other (specify					
		st) ( CARE, INC. OULEVARD, S	Middle UITE	,		3. Date of Earliest Transaction (Month/Day/Year) 04/09/2007								below)  Settlor-Molina Siblings Trust					
					4.1	f Amer	dment	, Date	e of Ori	ginal F	Filed (Month/	Day/Yea	r)	6. Indi Line)	vidual o	r Joint/Grou	p Filing (	(Check A	pplicable
(Street) SACRAME	ENTO CA	Λ 9	95825	5-0001										X		n filed by On		•	
(City)	(Sta	ate) (	Zip)		-										Pers		ile tilali	one rrep	orang
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
'''' '''   [			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				Acquired (A) or D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price			ed action(s) 3 and 4)			(Instr. 4)
Common St	tock			04/09/20	07				S <sup>(1)</sup>		23,600	D	\$32	(2)	1	8,108	I		See footnote <sup>(3)</sup>
Common St	tock			04/10/20	07				S <sup>(1)</sup>		12,500	D	\$32.20	)78 <sup>(2)</sup>	5	5,608	I		See footnote <sup>(3)</sup>
Common St	tock														12	1,937	I		See footnote <sup>(4)</sup>
Common St	tock														4	1,956	I		See footnote <sup>(5)</sup>
Common St	tock														1	4,681	D <sup>(</sup>	(6)	
Common Stock												428,196		D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security or (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exect if any	eemed ution Date, (th/Day/Year)		action (Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed ) : 3, 4	Expi (Mor	iration nth/Da	y/Year)	Amou Secu Unde Deriv Secu and 4	rities rlying ative rity (Instr.	Der Sec (Ins	Price of ivative surity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or I (I) (	nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. The shares were sold under the Rule 10b5-1 Trading Plan of the Reporting Person.
- 2. Represents the weighted average sale price of sales on the transaction date.
- 3. The shares are owned by the Watt Family Trust, of which Ms. Watt is co-trustee and co-beneficiary.
- 4. The shares are owned by the Janet Marie Watt Trust (1995), of which Ms. Watt is a co-trustee and beneficiary.
- 5. 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.
- $\ensuremath{\mathsf{6}}.$  The shares are owned by Ms. Watt and her spouse as community property.

## Remarks:

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

04/10/2007

\*\* 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.