(Street)

(City)

(Last)

SACRAMENTO CA

(State)

(First)

1. Name and Address of Reporting Person* **MOLINA SIBLINGS TRUST** 95825

(Zip)

(Middle)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

neck this box if no longer subject to
ction 16. Form 4 or Form 5
ligations may continue. See

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

Instruc	tion 1(b).			FII							irities Exchai Company Ac		1934			<u>, — — </u>			
1. Name and Address of Reporting Person* MOLINA JOHN C					2. Issuer Name and Ticker or Trading Symbol MOLINA HEALTHCARE INC [MOH]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) 300 UNIVERSITY AVE., SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2015								X	below	r (give title) Γrustee/Se	X	below)		
(Street) SACRAMENTO CA 95825			4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Form filed by One Reporting Person Form filed by More than One Reporting				on		
(City)	(S		(Zip)												Perso				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day			ction	2A Ex	A. Deemed execution Date, any Month/Day/Year)		3.		sposed of, or Bene 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		d (A) o	or 5. Am Secur Benef Owne		nt of es ally 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)	Price	9	Reported Transaction(s) (Instr. 3 and 4)				(11150.4)	
Common	Stock			04/01/2015					A ⁽¹⁾		40,341	A	\$66.31(2)		128,2	128,278(3)(4)(5)		D	
Common	Stock					┸									666	,623(6)		D	
Common Stock													1,:		4,840			Trustee of Family Trust ⁽⁷⁾	
Common Stock												35		8,396		I	Trustee of Family Trust ⁽⁸⁾		
Common	Stock														11	,154		D (9)	
		Т	able II								posed of				Owned				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Executi ty or Exercise (Month/Day/Year) if any		med 4. on Date, Tran		ransaction ode (Instr.		5. Number on			isable and	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		unt 8	s. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amor or Numl of Share	ber					
Stock Option (Right to Buy)	\$20.88								(10)		03/01/2017	Common Stock	54,0	000		54,000		D	
	nd Address of	Reporting Person*																	
(Last) 300 UNI	VERSITY	(First) AVE., SUITE 10	,	iddle)															

741 ATLANTIC AVENUE						
(Street) LONG BEACH	CA	90813				
(City)	(State)	(Zip)				

Explanation of Responses:

- 1. Grant of restricted stock subject to vesting under the Issuer's 2011 Equity Incentive Plan.
- 2. Represents the closing price of the Issuer's common stock on April 1, 2015.
- 3. 23,357 shares shall vest upon the Company achieving total revenue in any of the 2013, 2014, or 2015 fiscal years equal to or greater than \$12 billion; and 7,786 shares vest on March 1, 2016.
- 4. 14,199 of such shares vest in one-half increments on each of March 1, 2016 and March 1, 2017. 7,099 of such shares vest upon the Company achieving three-year Total Stockholder Return (TSR) as determined by ISS calculations that is greater than the median TSR achieved by the Company's ISS peer group for the three-year period ending December 31, 2016. 17,748 of such shares vest upon the Company achieving a three-year EBITDA margin percentage for the three-year period ending December 31, 2016 equal to or greater than 4.0%. 17,748 of such shares vest upon the Company achieving a cumulative earnings per share of at least \$8.50 for the three year period ending December 31, 2016.
- 5. The 40,341 newly granted shares vest as follows: (i) 4,034 shares vest based on the Company's fiscal year 2016 annual premium revenue achievement; (ii) 4,034 shares vest based on the Company's fiscal year 2016 net profit margin achievement; (iii) 4,034 shares vest based on the Company's 2017 annual premium revenue achievement; (v) 4,034 shares vest based on the Company's 2017 net profit margin achievement; (vi) 4,034 shares vest based on the Company's 2017 net profit margin achievement; (vi) 4,034 shares vest based on pre-tax income in fiscal year 2017; (vii) 4,034 shares vest upon the Company's achieving a three-year TSR for the three-year period ending December 31, 2017 as determined by ISS calculations that is greater than the median TSR achieved by the Company's 2015 ISS peer group; and (viii) 12,103 shares shall vest in one-third increments over three years, on each of April 1, 2016, April 1, 2017, and April 1, 2018. See 2015 Definitive Proxy Statement.
- 6. All of these shares are fully vested.
- 7. The shares are owned by the Molina Siblings Trust, of which Mr. Molina is the trustee and certain immediate family members of Mr. Molina are the beneficiaries.
- 8. The shares are owned by the John C. Molina Separate Property Trust, of which Mr. Molina is the trustee and beneficiary.
- 9. The shares are owned by Mr. Molina and his spouse as community property.
- 10. The options are fully vested.

Remarks:

John C. Molina, by Karen I.
Calhoun, Attorney-in-Fact

John C. Molina, Trustee of the
Molina Siblings Trust, by
Karen Calhoun, Attorney-InFact

04/03/2015

** 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.