## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

## 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*  MOLINA JOHN C					2. Issuer Name and Ticker or Trading Symbol MOLINA HEALTHCARE INC [ MOH ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
	A HEALTH	rst) CARE, INC. BOULEVARD, S	(Middle) SUITE 440	)		3. Date of Earliest Transaction (Month/Day/Year) 10/15/2007  X Officer (give title X below) Exec. V.P., Financial Affairs / Settlor-N Siblings Trust													
(Street) SACRAMENTO CA 95825-0001			01	4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)									Person							
		Tab	le I - Nor	n-Deriv	ativ	e Se	curiti	es Ac	quired,	Dis	posed o	f, or Be	nefi	cially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		5)			4 and Securities Beneficies Owned I		es ally Following d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	irect direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D) Pri		ice	Transaction(s) (Instr. 3 and 4)					
Common	Stock			10/1	5/200	7			S <sup>(1)</sup>		900	D	\$	35.48	3,33	1,515	I		Trustee of Family Trust <sup>(2)</sup>
Common	Stock			10/1	5/200	7			S <sup>(1)</sup>		41	D	\$	35.11	3,33	1,474	I		Trustee of Family Trust <sup>(2)</sup>
Common	Stock			10/1	5/200	7			S <sup>(1)</sup>		1	D	\$	35.02	3,33	1,473	I		Trustee of Family Trust <sup>(2)</sup>
Common	Stock														656	,133	D		
Common Stock														20,	,000	I		Trust <sup>(3)</sup>	
Common Stock														30,000		I		Trust <sup>(4)</sup>	
Common Stock												$\perp$		7,436		D(	5)		
Common	Stock														50,	394	I		Trustee of Family Trust <sup>(6)</sup>
		7	Гable II -								osed of, onvertil				Owned				
1. Title of Derivative Security  1. Title of Derivative Security  1. Title of Derivative Security  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  34. Deemed Execution Date if any (Month/Day/Year)		d Date,	ate, Transaction		5. Number 6.		. Date Exe	Date Exercisab piration Date onth/Day/Year)		7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		ount	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Securities Owned Following Reported Transacti (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	vnership orm: rect (D) Indirect	Beneficial Ownership (Instr. 4)		
					Code	v	(A)		ate Exercisabl		expiration Date	Title	or Num of Sha						
Stock Option (Right to Buy)	\$31.32								3/01/2008	(7)	3/01/2017	Common Stock	36,	000		36,00	0	D	

## **Explanation of Responses:**

- 1. The shares were sold under the Rule 10b5-1 Trading Plan of the Reporting Person.
- 2. The shares are owned by the Molina Sibilings Trust, of which Mr. Molina is the trustee and certain immediate family members of Mr. Molina are the beneficiaries.
- 3. The shares are owned by the JCM GRAT 607/5, of which Mr. Molina is a beneficiary.
- 4. The shares are owned by the JCM GRAT 607/2, of which Mr. Molina is a beneficiary.
- 5. The shares are owned by Mr. Molina and his spouse as community property.
- 6. The shares are owned by the M/T Molina Children's Education Trust, of which Mr. Molina is the trustee and certain immediate family members of Mr. Molina are the beneficiaries.

7. The options vest in one-fourth increments on each of 3/1/2008, 3/1/2009, 3/1/2010 and 3/1/2011.

Remarks:

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

10/17/2007

\*\* 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.