FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL					
OMB Number:	3235-0287					
Estimated average burd	den					
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

1. Name and Address of Reporting Person* MARY R MOLINA LIVING TRUST						2. Issuer Name and Ticker or Trading Symbol MOLINA HEALTHCARE INC [MOH]									heck all a Dir Off	p of Reportin plicable) ctor er (give title	ng Pers	10% C	(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) C/O WILLIAM DENTINO AND CURTIS PEDERSEN							3. Date of Earliest Transaction (Month/Day/Year) 12/22/2004									ow)		below)		
555 CAPITOL MALL SUITE 1500							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SACRAMENTO CA 95814															X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																	
		Tabl	e I - Nor	n-Deriva	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	ficia	lly Owr	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 5)			quired ((Instr. :	A) or 3, 4 ar	d Secu Bene Own	5. Amount of Securities Beneficially Owned Following Reported		nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	() ()	A) or D)	Price	Tran	saction(s) :. 3 and 4)			(1130.4)	
Common Stock 12/22/.					2004			J ⁽¹⁾		173,23	5	A	\$() 4	4,148,026		D			
Common Stock 12/22/2					/2004						3,836		D	\$() 4	4,144,190		D		
		Та									sed of, onvertib				/ Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date, Transaction Code (Ins					6. Date E Expiratio (Month/D	n Dat	Amo Secu Unde Deriv Secu		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		y Di or (I)	0. Dwnership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				(Code	v	(A)				Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

1. Gift to trust by settlor.

William Dentino, Co-Trustee,

by Karen Calhoun, Attorney-12/23/2004

In-Fact

Curtis Pedersen, Co-Trustee,

by Karen Calhoun, Attorney-12/23/2004

In-Fact

** 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.