FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

549	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(h)

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* MOLINA JOHN C														5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (six title Check (check))				
(Last) (First) (Middle) C/O MOLINA HEALTHCARE, INC. ONE GOLDEN SHORE DRIVE (Street) LONG BEACH CA 90802					3. Date of Earliest Transaction (Month/Day/Year) 03/24/2004								Officer (give title below) Exec. V.P., CFO / Trustee					
				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	Forn Forn	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St		Zip)															
1. Title of S	ecurity (Inst		e I - Nor	1-Deriva 2. Transa	ative Securities Acqu		3. 4. Se			d of, or Beneficial curities Acquired (A) or				ount of	6. Ownership	7. Nature		
1. Title of Security (Instr. 3)			Date (Month/Day/Year)		Execution Date,	Transa Code (Disposed Of (D) (Instr. 3, 4			3, 4 and	Benefi Owned	Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership			
						Code	v	Amount	(,	A) or D)	Price	Transa	action(s) 3 and 4)		(Instr. 4)			
Common	Stock			03/24	/2004			S		557,14	2	D	\$28	49	99,536	I	Trustee of Family Trust ⁽¹⁾	
Common	Stock			03/24	/2004			S		142,85	8	D	\$28	18	30,200	I	Trustee of Family Trust ⁽²⁾	
Common	Stock													43	38,559	D		
Common	Stock													19	92,303	I	Trustee of Family Trust ⁽³⁾	
Common	Stock													6	2,933	I	Trustee of Family Trust ⁽⁴⁾	
Common	Stock													3,3	356,000	I	Trustee of Family Trust ⁽⁵⁾	
Common	Stock													23	38,133	I	Trustee of Family Trust ⁽⁶⁾	
Common	Stock													5	0,394	I	Trustee of Family Trust ⁽⁷⁾	
		Та								sed of, o				wned				
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deeme	ed Date,	d 4. Date, Transacti Code (Ins		5. Number on of			able and	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		8. F Der Sec (Ins	Price of ivative curity etr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V	(4)	(D)	Date Exercisa		Expiration	Title	Amo or Num of Shar	ber					

Explanation of Responses:

- 1. The shares are owned by the MRM GRAT 301/3, of which Mr. Molina is the trustee and certain immediate family members of Mr. Molina are the beneficiaries.
- 2. The shares are owned by the MRM GRAT 502/2, 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 John C. Molina Trust (1995), of which Mr. Molina is a co-trustee and beneficiary.
- 4. The shares are owned by the Molina Children's Trust for John C. Molina (1977), of which Mr. Molina is a co-trustee and beneficiary.
- 5. 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.
- 6. The shares are owned by the MRM GRAT 303/2, of which Mr. Molina is the trustee and certain immediate family members of Mr. Molina are the beneficiaries.
- 7. 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.

/s/ John C. Molina, by Karen
Calhoun, Attorney-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.