MOLINA HEALTHCARE INC

Form 4

December 13, 2006

	,									OMB A	PPROVAL		
FORM	Washington, D.C. 20549							OMB Number:	3235-0287				
Check this			Ü					Expires:	January 31,				
if no longe subject to Section 16 Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 0.5				
Form 5 obligation may conti See Instru-1(b).	s Section 17(a	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section											
(Print or Type R	esponses)												
1. Name and Address of Reporting Person * WATT JANET M			2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer				
		IOLINA MOH]	HEA	LT	HCARE	E INC		(Check all applicable)					
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)						Director 10% Owner Officer (give titleX Other (specify below)				
INC., 2277 F	EALTHCARE, FAIR OAKS RD, SUITE 440	17	2/12/200)6					Settlor-M	olina Siblings	Trust		
	(Street) 4. If Amendment Filed(Month/Day/				ent, Date Original ay/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
	NTO, CA 95825-								Form filed by M Person	fore than One Ro	eporting		
(City)	(State) ((Zip)	Table I	- Non	-De	rivative S	ecuri	ties Acc	quired, Disposed of	, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Oate, if (3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price					Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) Indirect (I) Instr. 4) 7. Nature of Indirect Indirect Ownership (Instr. 4)			
Common Stock									121,937	I	See footnote (1)		
Common Stock									41,956	I	See footnote (2)		
Common Stock									14,681	D (3)			
Common Stock	12/12/2006			J <u>(4)</u>		400	A	\$0	428,196	D			
	12/13/2006			G	V	200	D		57,408	I			

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Common\$ 0SeeStock(5)footnote (6)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					(Instr. 3, 4, and 5) (A) (D)	Date Expirati Exercisable Date	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

WATT JANET M MOLINA HEALTHCARE, INC. 2277 FAIR OAKS BOULEVARD, SUITE 440 SACRAMENTO, CA 95825-0001

Settlor-Molina Siblings Trust

Signatures

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

12/13/2006

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The shares are owned by the Janet Marie Watt Trust (1995), of which Ms. Watt is a co-trustee and beneficiary.
- (2) 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.
- (3) The shares are owned by Ms. Watt and her spouse as community property.

Reporting Owners 2

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- (4) Transfer without consideration from the Mary R. Molina Living Trust.
- (5) Price not applicable to gift.
- (6) The shares are owned by the Watt Family Trust, of which Ms. Watt is co-trustee and co-beneficiary.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.