FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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

Name and Address of Reporting Person*																	Relationship of Reporting Person(s) to Issuer (Check all applicable)							
MOLINA J MARIO MD													L			X	Directo				% Owr			
	A HEALTH	(First) (Middle) HEALTHCARE, INC. R OAKS BOULEVARD, SUITE 440					3. Date of Earliest Transaction (Month/Day/Year) 01/07/2008										X Officer (give title X Other (specify below) President & CEO / Settlor-Molina Siblings Trust							
(Street) SACRAMENTO CA 95825-0001					4.											6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City) (State) (Zip)						ative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Yo	a 2. E E	2A. Deemed Execution Date,			ransa Code (I	ction	4. Securities Acquii Disposed Of (D) (In			uired (A) or		5. A Sec Ber Ow	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								c	ode	v	Am	ount	(A) oı (D)	Price	•	Tra	nsaction(str. 3 and				(Instr.	4)		
Common Stock				01/07/200	8				S ⁽¹⁾		7	,000	D	D \$37.39		199,868			I		Trustee of trust ⁽²⁾			
Common Stock				01/08/2008					S ⁽¹⁾		23	23,000 П		\$38	\$38.2957(3)		176,868		I		Trustee of trust ⁽²⁾			
Common Stock				01/07/2008					S ⁽¹⁾		17	7,000 D		\$37	\$37.5594 ⁽³⁾		107,700		I		Sole manager of limited liability company ⁽⁴⁾			
Common Stock																160		0	I		General partner of family partnership ⁽⁵⁾			
Common Stock															8,054		D							
		٦	Гabl	e II - Deriv (e.a								oosed o				y Ov	wned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date,	4. Transa Code	action	5. Numb		6. D	ate Exe	ercisable and		7. of U	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		t 8. Price of Derivative Security		deriva Secur Benef Owne Follov Repor	rities ricially d ving rted action(s)	10. Owne Form: Direct or Ind (I) (Ins	ership :: :t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	e V	(A)	(D)	Date Exe	e rcisabl	e	Expiration Date		itle	Amount or Number of Shares									
Stock Option (Right to Buy)	\$31.32								03/0	1/2008	8(6) 03/01/2017			ommon Stock	36,000				36,000)			

Explanation of Responses:

- 1. Shares sold pursuant to the Rule 10b5-1 Trading Plan of the Reporting Person.
- 2. The shares are owned by the Joseph Marion Molina, M.D. Separate Property Trust, of which Dr. Molina is the sole trustee.
- 3. Represents the average sales price of all sales on the Transaction Date.
- 4. The shares are owned by the Molina Family, LLC, of which Dr. Molina is the sole manager.
- 5. The shares are owned by the Molina Family Partnership, L.P., of which Dr. Molina is the sole general partner. Dr. Molina and his spouse each hold a 0.5% ownership interest in the partnership. The remaining 99% of ownership interests in the partnership are held in equal amounts by the Joseph Marion Molina, M.D. Annuity Trust No. 1, the Joseph Marion Molina, M.D. Annuity Trust No. 2 and the Joseph Marion Molina, M.D. Annuity Trust No. 3. Dr. Molina is trustee and certain immediate family members of Dr. Molina are the beneficiaries of these trusts.
- $6. \ The \ options \ vest \ in \ one-fourth \ increments \ on \ each \ of \ 3/1/2008, \ 3/1/2009, \ 3/1/2010 \ and \ 3/1/2011.$

Remarks:

J. Mario Molina, M.D., is also known as Joseph Marion Molina, M.D.

J. Mario Molina, M.D., by Karen Calhoun, Attorney-in-Fact

01/08/2008

** Signature of Reporting Person

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.