FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

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STATEMENT	OF CHAI	NGES IN E	BENEFICIAL	OWNERSHIP

OMB APPROVAL

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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(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* MOLINA J MARIO MD					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						
(Last) 2277 FA	(Fi	rst) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/06/2006						X Officer (give title X Other (specify below) President & CEO / Settlor-Molina Siblings Trust							
(Street) SACRAM (City)	SACRAMENTO CA 95825			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tabl	e I - N	lon-Deriv	ative/	Sec	uritie	s Ac	quire	ed, D	isposed o	f, or E	Benefic	ially Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5)			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D) Price		Reported Transaction (Instr. 3 and				(Instr.	4)
Common Stock												160,0	160,000		I		General partner of family partnership. ⁽¹⁾		
Common Stock													175,7	00	I	- 1	of lin		
Common Stock 09/06/200				006	06		G	v	2,000	D	\$0 ⁽³⁾	421,1	421,142		D				
		Та	ble II								oosed of, convertib			lly Owned s)					
1. Title of Derivative Security (Instr. 3)	ivative urity or Exercise Price of Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) 8		4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rities ired osed			Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Securities Underlying Derivative Security (Instr. and 4)		Derivative Security (Instr. 5) Securi Owned Follow Report Transs (Instr.		ities Form: Direct Or Indiving (I) (Instantial contents)		ship c (D) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. 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.
- 2. The shares are owned by the Molina Family, LLC, of which Dr. Molina is the sole manager.
- 3. Price not applicable to gift.

Joseph M. Molina, M.D., by Jeff D. Barlow, Attorney-in-

09/08/2006

Fact.

** Signature of Reporting Person

n 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.

LIMITED POWER OF ATTORNEY FOR SECTION 16(a) FILINGS

Know all by these presents, that the undersigned hereby constitutes and appoints Mark L. Andrews and Jeff D. Barlow, and each acting singly, the undersigned's true and lawful attorney-in-fact to:

- 1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer, director and/or stockholder of Molina Healthcare, Inc. (the 'Company'), Forms ID, 3, 4, and 5 and amendments thereto in accordance with Section 16(a) of the Securities Exchange Act of 1934 and the rules thereunder; and
- 2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Forms ID, 3, 4, or 5 or amendment thereto and timely file such form with the United States Securities and Exchange Commission (the 'SEC') and any stock exchange or similar authority.

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted. The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Company assuming, any of the undersigned's responsibilities to comply with Section 16 of the Securities Exchange Act of 1934.

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms ID, 3, 4, and 5 with respect to the undersigned's holdings of and transaction in securities of the Company, unless earlier revoked by the undersigned in a signed writing delivered to the foregoing attorneys-in-fact. This Power of Attorney may be filed with the SEC as a confirming statement of the authority granted herein.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 26th day of August, 2005.

/s/ Josephine M. Molina Signature

Josephine M. Molina Printed Name

Exhibit 24.1