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WATT JANI Form 4												
FORM	ГЛ	статес	SECUD	TTIES A	ND EVC	'U A N	JCEO	COMMISSION		PPROVAL		
	UNITED	SIAILS		hington,			IGE (20101101155101N	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or					CIAI			burden hou	Expires: January 31 2005 Estimated average burden hours per response 0.5			
obligation may cont <i>See</i> Instru 1(b).	ns inue. Section 17(a) of the	Public Ut		ling Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40	n			
(Print or Type F	Responses)											
1. Name and A WATT JAN	ddress of Reporting	Person <u>*</u>	Symbol	Name and A HEAL				5. Relationship of Issuer (Chec	Reporting Per			
(Last)	(First) (A							Director 10% Owner				
	NA HEALTHCA GOLDEN SHOF		(Month/D 12/09/20	-				below)	title <u>X</u> Oth below) folina Siblings			
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
(City)	(State)	(Zip)	T 11		• • •	•		Person				
1.Title of	. ,	-		e I - Non-D 3.				<pre>juired, Disposed of 5. Amount of</pre>	6. Ownership	-		
Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if Transac Instr. 3) any Code		Transactio		sposed	of	Securities Deneficially Owned Deneficially Reported Transaction(s)	Form: Direct (D) or Indirect (I) (Instr. 4)				
a				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	12/09/2005			J <u>(1)</u>	95,108	D	\$0	427,796	D			
Common Stock	12/09/2005			J <u>(1)</u>	95,108	А	\$ 0	95,108	I	See Footnote (2)		
Common Stock	12/09/2005			S <u>(3)</u>	5,000	D	\$ 28	90,108	I	See Footnote (2)		
Common								121,937	Ι	See		

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Stock			footnote (4)
Common Stock	41,956	Ι	See Footnote
Common Stock	14,681	D <u>(6)</u>	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

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. Transactio Code (Instr. 8)	5. 6. Date Exercisab onNumber Expiration Date of (Month/Day/Year Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WATT JANET M C/O MOLINA HEALTHCARE, INC. ONE GOLDEN SHORE DRIVE LONG BEACH, CA 90802				Settlor-Molina Siblings Trust			
Signatures							
/s/ Janet M. Watt, by Karen Calhoun, Attorney-in-Fact			12/12/20	005			
<u>**</u> 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) Transfer without consideration to the Watt Family Trust.
- (2) The shares are owned by the Watt Family Trust, of which Ms. Watt is co-trustee and co-beneficiary.
- (3) Sale pursuant to the Watt Family Trust's Rule 10b5-1 plan.
- (4) The shares are owned by the Janet Marie Watt Trust (1995), of which Ms. Watt is a co-trustee and beneficiary.
- (5) 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.
- (6) The shares are owned by Ms. Watt and her spouse as community property.

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.