#### MOLINA HEALTHCARE INC

Form 4

August 10, 2015

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** 

3235-0287 Number:

January 31, Expires: 2005

**OMB APPROVAL** 

Estimated average burden hours per

0.5 response...

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* ROMNEY RONNA

2. Issuer Name and Ticker or Trading

Symbol

MOLINA HEALTHCARE INC [MOH]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last) (First) (Middle) 3. Date of Earliest Transaction

> (Month/Day/Year) 08/10/2015

X\_ Director Officer (give title below)

10% Owner Other (specify

300 UNIVERSITY AVENUE, SUITE 100

> (Street) 4. If Amendment, Date Original

> > Filed(Month/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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

SACRAMENTO, CA 95825

(State)

(Zip)

(City)

| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Date, if any | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) |        |           | 5. Amount of<br>Securities<br>Beneficially | 6. Ownership Form: Direct (D) or         | Indirect<br>Beneficial     |                      |  |
|--------------------------------------|--------------------------------------|------------------------|--|--------|-----------|--|--|----------------------------|----------------------|--|
|                                      |                                      | (Month/Day/Year)       | (Instr. 8)   |        |           |  | Owned Following                          | Indirect (I)<br>(Instr. 4) | Ownership (Instr. 4) |  |
|                                      |                                      |                        | C-1- V   | A      | (A)<br>or | D.   | Reported Transaction(s) (Instr. 3 and 4) | (III3ti. +)                | (Ilisti: 1)          |  |
|                                      |                                      |                        | Code V   | Amount | (D)       | Price                                      |  |                            |                      |  |
| Common                               | 09/10/2015                           |                        | <b>c</b> (1)   | 250    | D         | \$ 76.02                                   | 24 170                                   | ĭ                          | Held by              |  |

08/10/2015 Stock

 $S^{(1)}$ 250 76.02 (2)

24,170

trust (3)

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)

#### Edgar Filing: MOLINA HEALTHCARE INC - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, |             | ate        | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |  |
|---|---|---|---|--|--|-------------|------------|---|---|---|--|
|   |   |   |   |  | 4, and 5)  | Date        | Expiration |   | Amount  |   |  |
|   |   |   |   | Code V                                 | (A) (D)  | Exercisable | Date       | Title   | Number<br>of<br>Shares                              |   |  |

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

ROMNEY RONNA
300 UNIVERSITY AVENUE, SUITE 100 X
SACRAMENTO, CA 95825

## **Signatures**

Jeff D. Barlow, by power of attorney for Ronna Romney.

08/10/2015

\*\*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 sale was made pursuant to Reporting Person's Rule 10b5-1 Trading Plain that was established on December 5, 2014.
- (2) Represents the actual selling price of all 250 shares.
- (3) All shares held by Ronna Romney Revocable Trust.

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.

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