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OLSEN GEO	ORGE KIRK										
Form 4											
July 05, 2005	5										
FORM	14								OMB AF	PROVAL	
	UNITED	STATES		RITIES A			NGE C	COMMISSION	OMB Number:	3235-0287	
Check the				0					Expires:	January 31	
if no long subject to	SI ATHN	AENT O	F CHAN	GES IN I	BENEF	ICIA	LOW	NERSHIP OF	200		
Section 1				SECURITIES					Estimated average burden hours per		
	Form 4 or										
Form 5	Filed put	suant to	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	response	0.5	
obligation	ns Section 17(•	1935 or Section	1		
may cont <i>See</i> Instru	inue.			vestment	•	· ·	•				
1(b).					1	2					
(Print or Type H	Responses)										
	ddress of Reporting	Person [*]	2. Issuer Name and Ticker or Trading				ng	5. Relationship of Reporting Person(s) to			
OLSEN GE	Symbol	Symbol					Issuer				
	MOLINA HEALTHCARE INC					(Chec)	k all applicable)			
			[MOH]					(Chee)	k an appreable)	
(Last)	(First) (Middle)	3. Date of	Earliest Tra	ansaction			Director	10%	Owner	
2277 FAIR OAKS BLVD, STE 440			(Month/Day/Year)					XOfficer (give titleOther (specify below) below)			
			06/30/2005					Pres & CEO of Molina of UT			
	(Streat)		4 10 4	1 (D	0.1.1						
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check			
			rneu(mor	ith/Day/Year)				Applicable Line) _X_ Form filed by C	One Reporting Pe	rson	
SACRAME	NTO, CA 95825							Form filed by M			
57 CICICICICIC	1110, 011 95025							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deer	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Executio	n Date, if	tate, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities	Form: Direct	Indirect	
(Instr. 3)		any								Beneficial	
		(Month/I	Day/Year)	(Instr. 8)				Owned	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Following Reported	(IIIstr. 4)	(IIIsu. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common				Coue v	Amount	(D)	Flice				
Stock								1,788	D		
Common	06/30/2005			J (1)	395	А	\$	2,183	D		
Stock	0013012003			J	575	11	44.26	2,105	D		

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 25.33					02/10/2005(2)	02/10/2014	Common Stock	8,500
Stock Options (Right to Buy)	\$ 3.13					<u>(3)</u>	05/11/2010	Common Stock	11,860
Stock Options (Right to Buy)	\$ 44.29	07/01/2005		А	3,300	07/01/2006 <u>(4)</u>	07/01/2015	Common Stock	3,300

Reporting Owners

Reporting Owner Name / Address						
	Director	10% Owner	Officer	Other		
OLSEN GEORGE KIRK 2277 FAIR OAKS BLVD, STE 440 SACRAMENTO, CA 95825			Pres & CEO of Molina of UT			
Signatures						
G. Kirk Olsen, by Jeff D. Barlow, Attorney-in-Fact.	07/05/2005					
**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 were acquired under the Molina Healthcare, Inc. 2002 Employee Stock Purchase Plan.
- (2) The options vest one-third on each of 2/10/2005, 2/10/2006, and 2/10/2007.
- (3) The options became fully exercisable upon the closing of the initial public offering of the issuer.

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(4) The options vest one-third on each of 7/1/2006, 7/1/2007, and 7/1/2008.

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.