## Edgar Filing: MOLINA HEALTHCARE INC - Form 4

MOLINA H Form 4 March 10, 2	IEALTHCARE I 017	NC									
FORM	UNITED	ED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB AF OMB Number:	PROVAL 3235-0287	
Check th if no lon subject t Section Form 4 o Form 5 obligatio may con <i>See</i> Instr 1(b).	rsuant to S (a) of the I	OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES o Section 16(a) of the Securities Exchange Act of 1934, he Public Utility Holding Company Act of 1935 or Section h) of the Investment Company Act of 1940						Expires: January 3 200 Estimated average burden hours per response 0.			
(Print or Type	Responses)										
ROMNEY RONNA Syr				er Name <b>an</b> o NA HEAI 				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mo				of Earliest T Day/Year) 2017	ransaction			_X_Director10% Owner Officer (give titleOther (specify below)below)			
				endment, D onth/Day/Yea	-	al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
	ENTO, CA 95825	5					i	Form filed by Mo Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficiall	ly Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			Date, if	Code (Instr. 3, 4 and 5)				Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code V	Amount	or	Price \$	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	Hald by	
Common Stock	03/08/2017			S	1,943	D	48.8151 (1)	21,605	Ι	Held by trust <u>(2)</u>	

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

De Se	Title of erivative ecurity nstr. 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
For	Director	10% Owner	Officer	Other			
ROMNEY RONNA 300 UNIVERSITY AVENUE, SUITE 100 SACRAMENTO, CA 95825	Х						
Signatures							
Jeff D. Barlow, by power of attorney for Ro Romney.	nna	03/10/2017					
**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) Represents the weighted average selling price with a selling price range between \$48.805 and \$48.817.
- (2) 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.