FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN 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 7									
Name and Address of Reporting Person* Thomson David							2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Thomson David						MINIMA COM [MINO]								Directo			10% Ov	-		
			3.1	Date of Earliest Transaction (Month/Day/Year)								Officer below)	r (give title		Other (s below)	specify				
(Last) (First) (Middle)							12/08/2006								VP & General Counsel					
28903 NORTH AVENUE PAINE																				
							4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street) VALENCIA CA 91355													Line) X Form filed by One Reporting Person							
VALENCIA CA 91555				_										,		One Repor				
(City) (State) (Zip)														Person				3		
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			ble I - Nor	1					-	DIS	1			_						
1. Title of Security (Instr. 3) 2. Trans Date						Execution Date,			, Transa	3. 4. Securities Acquired Disposed Of (D) (Instr.				, 4 and Securitie		Form	: Direct	7. Nature of Indirect		
[0					(Month/Day/Year)		if any (Month/Day/Year)		Code (Instr. 5) ar) 8)					ollowing		or Indirect (Instr. 4)	Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reported Transact	ion(s)			(Instr. 4)		
									Jour	_		_	11100	(Instr. 3	and 4)	<u> </u>				
Common	Stock, \$.01	l Par Value	08/200	/2006		A		3,000 ⁽¹⁾ A		\$0.00) 26,	26,462		D						
			Table II -	Deriva	ative	Sec	urities	Acq	uired, D	ispo	sed of,	or Bene	ficially	Owned						
			((e.g.,	puts,	, call	s, warr	ants	s, option	s, c	onvertik	ole secu	rities) [°]							
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Date, 7	4. Transaction Code (Instr.		. Derivative		6. Date Exercisal					8. Price of	9. Numbe		10.	Beneficial		
Derivative Security	Conversion or Exercise								Expiration (Month/Day		r) Underlying		g	Derivative Security	Securities		Ownership Form:			
(Instr. 3)	Price of Derivative			Year)	8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Derivative Sec (Instr. 3 and 4)					(Instr. 5)	Beneficially Owned Following Reported		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
	Security																			
															Transaction (Instr. 4)	on(s)				
										Т			Amount	1						
													or Number							
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	of Shares							
Employee										\dashv						\dashv		1		
Stock Option	\$17.41	12/08/2006			A		19,000		08/16/2007	(2)	12/08/2016	Common	19,000	\$17.41	19.00	, I	D			
(right to	•••••	12,00,2000					15,000		00/10/2007			Stock	=5,550	•••••	15,00	_	_			

Explanation of Responses:

- 1. Acquired pursuant to a Restricted Stock Unit Award: 25% vest on each year anniversary of the vesting determination date and 25% each anniversary thereafter; shares shall fully vest on the fourth year anniversary of the vesting determination date.
- $2.\,25\% \ vesting \ on \ the \ anniversary \ of \ the \ vesting \ determination \ date \ and \ 1/48 th \ per \ month \ thereafter; being \ fully \ vested \ on \ the \ fourth \ anniversary \ of \ the \ vesting \ determination \ date.$

Remarks:

<u>/s/ David Thomson</u> <u>12/14/2006</u>

** Signature of Reporting Person 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.