FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasnington,	D.C.	20549	

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burde	n								
l	hours per response:	0.5								

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. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol  MANNKIND CORP [ MNKD ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) 28903 N		irst) ENUE PAINE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/19/2009									below)	(give title	X EO / :	Other (sbelow)	
(Street) VALENC	CIA C	A	91355		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)				Line	e) <mark>X</mark> Form fil	I							
(City)	(5	state)	(Zip)												Person				
		Та	able I - No	n-Deri	ivati	ve S	ecuritie	s A	quired	Dis	posed o	f, o	r Bene	eficially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	ount (A) or (D)		Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)		
Common Stock, \$.01 Par Value													41,05	8,060		1	Alfred E. Mann Living Trust		
Common Stock, \$.01 Par Value													4,02	5,979			Biomed Partners		
Common Stock, \$.01 Par Value													2,400	6,027		I	Biomed Partnerns II		
Common Stock, \$.01 Par Value											10,968			I	MannCo				
Common Stock, \$.01 Par Value		08/1	/19/2009				A		40,000(1)		A	\$0.00	498	498,390		D			
			Table II -								osed of, onvertil				Owned				
1. Title of 2. 3. Transaction 3A. Deemed 4. Execution Date, Tran		4. Transa Code (	5. Number of 6.		6. Date Expiration	Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		Amount s security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)			
Employee Stock Option (right to	\$7.48	08/19/2009			A		160,000		08/19/201	0(2)	08/19/2019		nmon	160,000	\$7.48	160,0	000	D	

## **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 1/48th per month thereafter; being fully vested on the fourth anniversary of the vesting determination date.

## Remarks:

/s/ Alfred E. Mann

08/21/2009

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.