FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
1	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 a	2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [ MNKD ]											p of Reporti plicable) ctor	ng Per	son(s) to I					
(Last) (First) (Middle) 1 CASPER STREET					3. Date of Earliest Transaction (Month/Day/Year) 08/01/2023									X	belov			Other (s below) Officer	specify
(Street) DANBURY CT 06810					4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivine)	′				
(City)	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					on 2A. Deemed Execution Date,			ate,				es Acquired (A) Of (D) (Instr. 3,		or 5. Am		ount of ities icially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) o (D)	Price	(Instr.		action(s) 3 and 4)			
Common Stock, \$.01 Par Value 08/01/20						)23		S <sup>(1)</sup>		10,000	D	\$4.5	5686 2,49		196,735		D		
		Tab	le II ·	Derivativ (e.g., pu											Owne	ed			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any		ution Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		ate (ear)	7. Titl Amou Secur Under Deriva Secur (Instr.	int of ities rlying ative	nt				0. Ownership Orm: Orm: Or Indirect (D) Or Indirect O) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## ${\bf Explanation\ of\ Responses:}$

 $1.\ Transaction\ occurred\ pursuant\ to\ Rule\ 10B5-1\ Plan\ established\ December\ 19,\ 2022.$ 

## Remarks:

/s/ Michael Castagna

08/01/2023

\*\* 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.