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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: 3235-0287 Fs

hours per response:	0.5
Lotimated average burden	

						- 500	lion 30(n)				omp		51 1 54	<u> </u>							
1. Name and Address of Reporting Person [*] KRESA KENT						2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					1										2	C Directo	r		10% Ov	vner	
(Last) (First) (Middle) 28903 NORTH AVENUE PAINE						3. Date of Earliest Transaction (Month/Day/Year) 05/22/2008										Officer below)	(give title		Other (s below)	specify	
																6 Individual or Jaint/Crown Filing (Chaok Applicable					
						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)		•	01255													K Form f	led by One	e Repo	orting Perso	า	
VALENCIA CA 91355															Form filed by More than One Repor				ting		
P																Persor	1				
(City)	(S	tate)	(Zip)																		
		Tal	ble I - Nor	n-Deriv	vativ	ve Se	ecuritie	s Ao	cquire	d, Di	spo	osed o	f, or	Ben	eficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transau Date (Month/Date)					Execution			Co	Transaction Disposed Code (Instr. 5)			ies Ac Of (D)	quired) (Instr.	(A) or 3, 4 and	5. Amou Securitie Benefici Owned F	es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Co	de V	4	Amount	(A) or (D) P		Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
			Table II -				urities Is, warr									Owned		·			
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	Exerci tion Da /Day/Yo	te	r) of Secu Underly Derivati		Fitle and Amount Securities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s dly g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					code	v	(A)		Date Exerci	ate xercisable		piration			Amount or Number of Shares						
Employee Stock Option	\$2.98	05/22/2008			A		10,000		06/22/2	008(1)	05/	/22/2018	Com	imon	10.000	\$2.98	10,00	0	D		

Explanation of Responses:

1. 3-year vesting period; 1/36th vesting every month, being fully vested 05/22/2011.

Remarks:

(right to buy)

/s/ Kent Kresa

Stock

07/30/2008 Date

** Signature of Reporting Person

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.