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

OMB APPROVAL OMB Number: Estimated average burden 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* Castagna Michael (Last) (First) (Middle) 30930 RUSSELL RANCH ROAD SUITE 301				3. D	2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD] 3. Date of Earliest Transaction (Month/Day/Year) 08/02/2018									k all applic Directo Officer below)	cable) or (give title	Ü	10% Ov Other (s below)	vner		
(Street) WESTLA VILLAC (City)	AKE C		91362 (Zip)		4. If	Ame	ndment, C	Date of	te of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action	Execution Date,			3. 4. Se Transaction Disp Code (Instr. 5)		4. Securiti Disposed	ies Acqu	red (A)	or 5. Amou 4 and Securiti Benefic		nt of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							(wondin Day) reary		Code	v	Amount	(A) (D)	ļ"		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, \$0.01 Par Value 08/02/						2018			P ⁽¹⁾		5,000	A	\$	1.31	68,	,157	D			
		T	able II - I								sed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercis Expiration Date (Month/Day/Yea		able and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8 D S (I	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				-	Code	v	(A)		Date Exercisal		Expiration Date	Title	Amou or Numb of Share	per						
Employee Stock Option (right to buy)	\$4.55	08/02/2018			A ⁽²⁾		50,000		08/02/20	18 (05/19/2026	Stock Options	50,0	00	\$4.55	50,000)	D		
Employee Stock Option (right to buy)	\$1.52	08/02/2018			A ⁽³⁾		57,750		08/02/20	18 (05/29/2027	Stock Options	57,7	50	\$1.52	57,750)	D		
Employee Stock Option (right to	\$1.42	08/02/2018			A ⁽⁴⁾		37,525		08/02/20	18 (05/25/2027	Stock Options	37,5	25	\$1.42	37,525	5	D		

Explanation of Responses:

- 1. The reporting person purchased shares through the Company's Employee Stock Purchase Plan on August 2, 2018, representing the maximum allowable under the Plan for this period.
- 2. On May 19, 2016, the reporting person was granted an option that vests upon the achievement of certain defined performance milestones. On August 2, 2018, one of the defined performance milestones was met, resulting in the partial vesting of the option.
- 3. On May 29, 2017, the reporting person was granted an option that vests upon the achievement of certain defined performance milestones. On August 2, 2018, one of the defined performance milestones was met, resulting in the partial vesting of the option.
- 4. On May 25, 2017, the reporting person was granted an option that vests upon the achievement of certain defined performance milestones. On August 2, 2018, one of the defined performance milestones was met, resulting in the partial vesting of the option.

Remarks:

/s/ Michael Castagna

08/06/2018

** 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.