FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ington, 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*  Edstrom Hakan						2. Issuer Name <b>and</b> Ticker or Trading Symbol MANNKIND CORP [ MNKD ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 28903 N		3. Date of Earliest Transaction (Month/Day/Year) 01/30/2015								Officer below)	(give title Presider	nt & C	10% Ow Other (s below)	·					
(Street) VALENCIA CA 91355  (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Andividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Ta	ble I - No	n-Deriv	vativ	ve Se	curi	ities Acc	quired,	Dis	posed of	, or Ben	eficially	/ Owned					
1. Title of Security (Instr. 3) 2. Tran			Date	ate lonth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos		4. Securitie Disposed C	es Acquired Of (D) (Instr.	(A) or . 3, 4 and 5	Beneficia Owned F	s ally ollowing	Form	: Direct I I I I I I I I I I I I I I I I I I I	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)				
Common Stock, \$.01 Par Value 01				01/30	0/201	/2015			M <sup>(1)</sup>		73,460	A	\$1.69	1,121,284			D		
Common	nmon Stock, \$.01 Par Value 01/30			0/201	/2015		S <sup>(1)</sup>		73,460	D \$6.343		3 1,047,824			D				
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Ye	Date, T	Code (Ins				6. Date Exercisa Expiration Date (Month/Day/Year		e of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Employee Stock Option	\$1.69	01/30/2015			M			73,460 <sup>(1)</sup>	05/17/2	013	05/17/2022	Common Stock, \$.01 Par	73,460	\$0.00	426,54	40	D		

## Explanation of Responses:

1. Transaction occurred pursuant to Rule 10B5-1 Plan.

## Remarks:

/s/ Hakan Edstrom

02/03/2015

\*\* 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.

 $Persons \ who \ respond \ to \ the \ collection \ of \ information \ contained \ in \ this \ form \ are \ not \ required \ to \ respond \ unless \ the \ form \ displays \ a \ currently \ valid \ OMB \ Number.$