FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| 1. Name and Address of Reporting Person* Palumbo Diane | | | | | | 2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD] | | | | | | | | | heck all app Direc | olicable) ctor | | Owner |
|---|--|------|---------------|---|----------------------------------|--|---|--|-------------------|--------------------|---|---|-------------|---|--|---|--|---|
| (Last) 28903 NO |) (First) (Middle) O3 NORTH AVENUE PAINE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/01/2009 | | | | | | | | | helov | , | below Human Reso | , |
| (Street) VALENC (City) | | | 91355 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Lir | ne) X Forn Forn | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or l | Bene | ficia | lly Owne | ed | | |
| Date | | | | Date | Date Exc Month/Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispo | | Disposed | urities Acquired (A) sed Of (D) (Instr. 3, 4 | | | d Securi Benefi | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A | () or () | Price | Transa | action(s) 3 and 4) | | (111301.4) |
| Common Stock, \$.01 Par Value | | | | 08/01 | 1/2009 | | | | F | | 10,368 | (1) | D \$8.03 | | 03 1 | 15,450 | D | |
| | | Та | | | | | | | | | sed of, onvertib | | | | Owned | | | |
| 1. Title of Derivative Security (Instr. 3) | rative Conversion Date Execution Date if any | | n Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | tr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Coo | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | of Shar | es | | | | | |

Explanation of Responses:

1. Shares withheld to satisfy the tax liability incident to the vesting of previously reported restricted stock units.

Remarks:

/s/ Diane Palumbo

08/04/2009

** 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.