FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									

0.5

hours per response:

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

					_														
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>COHEN ABRAHAM E</u>														7	Directo	r		10% Ov	wner
(Last) 28903 N	Last) (First) (Middle) 28903 NORTH AVENUE PAINE						3. Date of Earliest Transaction (Month/Day/Year) 08/13/2008								Officer (give title Other (spec below) below)				specify
			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. In	6. Individual or Joint/Group Filing (Check Applicable						
(Street)					_	, and the man and the control of the control o								Line)	Line) X Form filed by One Reporting Person				
VALENCIA CA 91355														Form filed by More than One Reporting					
(City) (State) (Zip)														Person	l				
		Tal	ble I - No	n-Deri	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or I	Bene	ficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			3. Transaction Code (Instr.) 8)			ies Acq Of (D) (uired (/ (Instr. 3	A) or 5, 4 and 5	Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount (A) or (D)		Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock, \$.01 Par Value 08/13/3							2008		A		10,000(1)		Α	\$0.00	32,767		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. Deeme Execution I if any (Month/Day	Date,	4. Transa Code (I 8)		of		6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		Expiration Date	Title	O N O	lumber					
Employee Stock Option (right to buy)	\$3.89	08/13/2008			A		22,000		08/13/2009	9(2)	08/13/2018	Comn		2,000	\$3.89	22,00	0	D	

Explanation of Responses:

- 1. 3-year vesting period; 1/3 vesting every year, being fully vested 08/13/2011.
- $2.\ 3-year\ vesting\ period;\ 1/36th\ vesting\ every\ month,\ being\ fully\ vested\ 08/13/2011.$

Remarks:

/s/ Abraham E. Cohen

08/15/2008

** 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.