FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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			Washington,	D.C.	20549

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	OMB APPRO					
IEFICIAL	OMB Number:	3235				
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

ANNUAL STATEMENT OF CHANGES IN BEN **OWNERSHIP**

OMB Number:	3235-0362
Estimated average bu	rden
hours por rosponso:	1.0

Form 3 Holdings Reported. Form 4 Transactions Reported.

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 Addr MacCallum		Person*	2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]		5. Relationship of Reporting Person(s) to Iss (Check all applicable)				
WidCCallulli	Daviu			X	Director	10% Owner			
(Last) (First) (Middle) 25134 RYE CANYON LOOP			3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016		Officer (give title below)	Other (specify below)			
			4. If Amendment, Date of Original Filed (Month/Day/Year)		6. Individual or Joint/Group Filing (Check Applicable				
(Street) VALENCIA	VALENCIA CA 91355			Line)	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)					Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)			or Disposed Of	5. Amount of Securities Beneficially Owned at end of	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial
		(Month/Day/Year)	8)	Amount	(A) or (D)	Price	Issuer's Fiscal Year (Instr. 3 and 4)	(Instr. 4)	Ownership (Instr. 4)
Common Stock, \$.01 Par Value	05/19/2016		A4	39,200(1)	A	\$0.00	153,990	D	
Common Stock, \$0.01 Par Value	05/19/2016		A4	65,217 ⁽²⁾	A	\$0.00	219,207	D	
Common Stock, \$0.01 Par Value	05/19/2016		A4	9,783(3)	Α	\$0.00	228,990	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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/Year)	4. Transaction Code (Instr. 8)	of E		6. Date Exerci Expiration Dat (Month/Day/Ye	Date Amou Year) Secur Under Deriva		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option	\$0.91	05/19/2016		4A	78,400		06/19/2016 ⁽⁴⁾	05/19/2026	Common Stock	78,400	\$0.00	78,400	D	

Explanation of Responses:

- 1. Restricted Stock Units with 3-year vesting period; 1/36th vesting every month, being fully vested on the third anniversary of the grant date.
- 2. Annual retainer received in equity in lieu of cash. Restricted Stock Units shall vest on the earlier of retirement, removal from board, death or five years from grant date.
- 3. Annual retainer received in equity in lieu of cash. Restricted Stock Units shall vest on the earlier of retirement or removal from board, provided that such retirement or removal occurs more than one year after grant date; death; or five years from grant date.
- 4. Annual equity award vesting in 36 equal monthly installments commencing one month from date of grant, being fully vested on the third anniversary of grant date.

Remarks:

/s/ David H. MacCallum

** Signature of Reporting Person

02/01/2017

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.