

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* MANN ALFRED E (Last) (First) (Middle) 28903 NORTH AVENUE PAINE (Street) VALENCIA CA 91355 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <input checked="" type="checkbox"/> Chairman & CEO / 10% Owner
	3. Date of Earliest Transaction (Month/Day/Year) 08/02/2005	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting 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 (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, \$.01 par value	08/02/2005		P		6,944,963	A	\$10.215 ⁽¹⁾	17,980,598	I	Alfred E. Mann Living Trust
Common Stock, \$.01 par value	08/02/2005		P		1,605,483	A	\$10.215 ⁽²⁾	4,025,989	I	Biomed Partners, LLC

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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	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)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Warrants	\$12.228	08/02/2005		P		1,388,993		01/29/2006	08/02/2010	Common Stock	1,388,993	\$10.215 ⁽¹⁾	1,388,993	I	Alfred E. Mann Living Trust
Warrants	\$12.228	08/02/2005		P		321,098		01/29/2006	08/02/2010	Common Stock	321,098	\$10.215 ⁽²⁾	321,098	I	Biomed Partners, LLC

Explanation of Responses:

- The reported securities are included within 6944963 units purchase by the reporting person for \$10.215 per unit. Each unit consists of one share of common stock and a portion of a warrant representing the right to purchase approximately 0.20 shares of common stock.
- The reported securities are included within 1605483 units purchase by the reporting person for \$10.215 per unit. Each unit consists of one share of common stock and a portion of a warrant representing the right to purchase approximately 0.20 shares of common stock.

Remarks:

Alfred E. Mann 08/04/2005

** 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.