FORM 4

### **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

ngton, D.C. 20549	OMB APPROVAL
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OMB Number: 3235-0287							
Estimated average burden							
nse: 0.5							

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  KRESA KENT					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) (First) (Middle) 28903 NORTH AVENUE PAINE					3. Date of Earliest Transaction (Month/Day/Year) 06/10/2010							Officer below)	r (give title		10% Ow Other (s below)	· I	
(Street) VALENCIA CA 91355				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)														
Date (Month			. Transactio ate Month/Day/Y	2A. Deemed Execution Date,		3. Transactic Code (Inst 8)	4. Secu Dispose 5)	Securities Acquired (A) sposed Of (D) (Instr. 3, 4 mount (A) or (D) Pr		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form:	: Direct   I Indirect   I str. 4)   (	7. Nature of ndirect Beneficial Dwnership Instr. 4)			
								uirea, Dis , options,				Ownea					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	4. Transaction Code (Instr. 8)		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to	\$6.25	06/10/2010		A		10,000		07/10/2010 <sup>(1)</sup>	06/09/202	Common Stock	10,000	\$6.25	10,000	0	D		

### **Explanation of Responses:**

 $1.\ 3-year\ vesting\ period;\ 1/36th\ vesting\ every\ month,\ being\ fully\ vested\ 06/10/2013.$ 

#### Remarks:

/s/ Kent Kresa

06/16/2010

\*\* Signature of Reporting Person

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.