FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burd	en
hours per response:	0.5

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

Name and Address of Reporting Person* Alinaya Rosabel Realica							2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]								of Reporting Perso cable) or (give title		on(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 30930 RUSSELL RANCH ROAD SUITE 301						3. Date of Earliest Transaction (Month/Day/Year) 08/02/2018								SVP, Investor Relations					
(Street) WESTLAKE VILLAGE CA 9136					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
		Tab	le I - Non-	Deriva	ative	Se	curities	Ac	quired,	Disp	osed of	f, or Be	neficia	lly Owned	1				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ate	Execution Da		Date,	Code (In					Benefici	ies Fo ially (D) Following (I)		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) o (D)	r Price	Transaci (Instr. 3	ction(s)			(11341.4)	
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) A. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5)		ve es ed ed nstr.	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 derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4		Beneficial Ownership t (Instr. 4)				
				c	ode	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$4.55	08/02/2018		I	A ⁽¹⁾		20,000		08/02/201	18 (05/19/2026	Stock Options	20,000	\$4.55	20,000		D		
Employee Stock Option (right to buy)	\$1.52	08/02/2018		I	A ⁽²⁾		12,500		08/02/201	18 (05/29/2027	Stock Options	12,500	\$1.52	12,500		D		
Employee Stock Option (right to	\$1.42	08/02/2018		I	A ⁽³⁾		15,750		08/02/201	18 (05/25/2027	Stock Options	15,750	\$1.42	15,750		D		

Explanation of Responses:

- 1. On May 19, 2016, the reporting person was granted an option that vests upon the achievement of certain defined performance milestones. On August 2, 2018, one of the defined performance milestones was met, resulting in the partial vesting of the option.
- 2. On May 29, 2017, the reporting person was granted an option that vests upon the achievement of certain defined performance milestones. On August 2, 2018, one of the defined performance milestones was met, resulting in the partial vesting of the option.
- 3. On May 25, 2017, the reporting person was granted an option that vests upon the achievement of certain defined performance milestones. On August 2, 2018, one of the defined performance milestones was met, resulting in the partial vesting of the option.

Remarks:

/s/ Rosabel R. Alinaya

08/06/2018

** 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.