FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Vashington	. D.C.	20549	

wasinington,	D.O. 20040	

l	OMB APPROVAL									
OMB Number: 3235-028										
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l	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

					0	r Sect	ion 30(n) o	t the i	nvestmer	it Cor	npany Act o	or 1940							
Name and Address of Reporting Person* Thomson David						2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owne					
(Last) (First) (Middle) 1 CASPER STREET						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024							X	Officer (give title below) EVP Genl Cou		Other (s below) nsel & Secretar		·	
(Street) DANBURY CT 06810				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	′						
(City)	(Sta		Zip)	n-Deri	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. vative Securities Acquired, Disposed of, or Beneficially Owned														
Date			2. Trans Date (Month)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) or I Of (D) (Instr. 3, 4 and 5			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
Common Stock, \$.01 Par Value			05/1	/15/2024				Code A ⁽¹⁾⁽²⁾	v	Amount	(A) (D)		Price \$0	Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common S	5tock, \$.01		Table II -	Deriva	ative	Sec			ired, D		osed of,	or Ben	efici	ally O		446		D	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		e	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transact	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun	ount mber Shares		(Instr. 4)	.011(3)		
Performance Restricted Stock Unit	(1)	05/15/2024			A		158,000		(3)		(3)	Common Stock, \$.01 Par Value	1159	8,000	\$0.00	158,0	00	D	

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of MNKD common stock
- 2. Acquired pursuant to a Restricted Stock Unit Award: 25% vests on July 15, 2025 and each yearly anniversary thereof until fully vested.
- 3. The performance-based restricted stock unit will vest on July 15, 2027. The number of shares delivered on the vesting date, as a percentage of the target specified in Box 5 above, is determined by the percentile ranking of MannKind total shareholder return (TSR) over the period from July 1, 2024 until June 30, 2027 relative to the TSR of the Russell 3000 Pharmaceutical & Biotechnology Index over the same three-year period, as follows: less than 25th percentile=0% of target, 25th percentile=50% of target, 50th percentile=100% of target, 75th percentile=200% percent of target, 90th percentile or higher=300% maximum. Payout values will be interpolated between the percentile rankings above.

/s/ David Thomson

05/1<u>7/2024</u>

** 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.