FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington D.C. 20549

ington, D.C. 20549	OMB APPROVAL
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- 1		
	OMB Number:	3235-0287
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	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).

# 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

					$\overline{}$								_							
1. Name and Address of Reporting Person*  Martens Juergen					2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [ MNKD ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>iviarten</u>	<u>is Juergen</u>	<u> </u>			1-										Director	•		10% Ov	vner	
					-									X		(give title		Other (s	pecify	
(Last)	<b>/</b> E	irst)	(Middle)		3. 1	3. Date of Earliest Transaction (Month/Day/Year)									below)			below)		
` '	`	,	(wildule)		08	08/15/2007								Corporate VP						
28903 N	ORTH AVE	ENUE PAINE														•				
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(Street)					4.	II Ame	enament,	Date o	r Originai	Filea	(Month/Day	y/ Year)	Lir		dual or J	oint/Group	Filing	(Check App	olicable	
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VALEN	CIA C	A	91355											Λ		,	•	Ü	- 1	
-					-										Form fi		e than	One Repor	ting	
(City)	(S	tate)	(Zip)												Person					
		Tal	ble I - No	n-Deri	ivativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Be	neficia	lly C	Owned					
1. Title of	Security (Ins	tr. 3)		2. Tran	saction	1	2A. Deem	ed	3.		4. Securiti	ies Acquir	ed (A) or		5. Amou	nt of 6. C		nership	7. Nature of	
Date				- ID IV		Execution	Date,		Transaction   Disposed (		Of (D) (Ins	tr. 3, 4 an	and 5)   Securitie		es Foi			Indirect		
				(Montr	n/Day/Y		if any (Month/Da	any Month/Day/Year)		Code (Instr.				Beneficia Owned F					Beneficial Ownership	
						(			, H,			1			Reported				(Instr. 4)	
									Code	v	Amount (A) or Pi		r Price		Transaction(s) (Instr. 3 and 4)					
				_					_			<u> </u>	_	-	<del> </del>		<del></del>			
Common Stock, \$.01 Par Value 08/15/				15/200	/2007		A		12,000	(1) A \$0.0		00	21,300			D				
						_		_					<u>.</u>							
			Table II -											y Ov	vned					
				(e.g.,	puts,	, call	s, warr	ants	, optior	ıs, c	onvertik	ole seci	ırities)							
1. Title of	2.	3. Transaction	d	4.		5. Number 6		6. Date Exercisal		able and 7. Title and Am		nd Amoun	mount 8. Price		9. Number	er of	10.	11. Nature		
Derivative	Conversion   Date   Execution Da				Transa				Expiration Date of Securitie				Derivative				Ownership			
				Code ( 8)	Instr.	Derivati Securiti	(Month/Day/Year) Underlying Derivative Section					Security rity (Instr. 5)		Securities Beneficially			Beneficial Ownership			
Derivative Security					٥,	Acquired			(Instr. 3 and 4)					\'	ioti. 0)	Owned		or Indirect (Instr.	(Instr. 4)	
							(A) or								Following Reported		(I) (Instr. 4)	1		
						Dispose of (D) (I								Transaction(s) (Instr. 4)			1			
						3, 4 and														
				Ī									Amoun						1	
													or						1	
								,	Date		Expiration		Numbe of	r					1	
					Code	v	(A)		<b>Exercisab</b>		Date	Title	Shares							
Employee								$\vdash$		_			1	$\top$			-			
Stock																				
Option	\$9.22	08/15/2007			Α		20,000		08/15/2008	<b>3</b> (2)	08/15/2017	Common   Stock	20,00	)	\$9.22	20,000	0	D		
(right to												] Stock								
niv)	ı	I	1			ı	1			- 1		1	1	- 1		I			1	

### **Explanation of Responses:**

- 1. Acquired pursuant to a Restricted Stock Unit Award: 25% vest on each year anniversary of the vesting determination date and 25% each anniversary thereafter; shares shall fully vest on the fourth year anniversary of the vesting determination date.
- $2.\,25\% \ vesting \ on \ the \ anniversary \ of \ the \ vesting \ determination \ date \ and \ 1/48th \ per \ month \ thereafter; being \ fully \ vested \ on \ the \ fourth \ anniversary \ of \ the \ vesting \ determination \ date.$

## Remarks:

/s/ Juergen Martens

08/16/2007

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.