FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Richardson Peter C</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD] | | | | | | | | | Check all a Dir | oplicable) ector | | Owner |
|--|---|--|--|---------|---|--|--|-------|-------------------------------------|--|---------------------|---|---|--------------|--|---------------------------|---|--|
| (Last) (First) (Middle) 28903 NORTH AVENUE PAINE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2009 | | | | | | | | | | X bel | , | below ntific Officer | (specify) |
| (Street) VALENCIA CA 91355 (City) (State) (Zip) | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ine) X Fo | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - No | n-Deri\ | /ative | Se | curitie | s Acc | quired, | Dis | posed o | f, or | Bene | efici | ally Owr | ned | | |
| Date | | | | | ate Exe Month/Day/Year) if a | | 2A. Deemed Execution Date, f any (Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | Disposed | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | | nd Secu Bend | ficially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | Tran | saction(s) r. 3 and 4) | | (111501.4) |
| Common Stock, \$.01 Par Value 06/30/ | | | | | | 2009 | | F | | 19,175 ⁽¹⁾ D | | D | \$8 | .44 | 124,818 | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Owne | d | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Executior if any (Month/Da | n Date, | 4. Transa Code (8) | | of Derive Security Acquer (A) or Disposor (Instr | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price of Derivative Security (Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | , | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amo or Nun of Sha | ber | | | | |

Explanation of Responses:

1. Shares withheld to satisfy the tax liability incident to the vesting of previously reported restricted stock units.

Remarks:

/s/ Peter Richardson

07/06/2009

** 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.