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Form 4										
February 19	ЛЛ							OMB A	PPROVAL	
	UNITED	STATES SECU	U RITIES Vashingtor			ANGE CO	OMMISSION	OMB Number:	3235-0287	
Check t if no lor subject Section Form 4	s box er STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 6. SECURITIES							Expires: Estimated a burden hou response	0	
Form 5 obligation may con <i>See</i> Inst 1(b).	ons ntinue. Section 17(
(Print or Type	Responses)									
Thomson David S			2. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month 28903 NORTH AVENUE PAINE (Street) 4. If An			3. Date of Earliest Transaction(Month/Day/Year)02/18/2010				Director 10% Owner X Officer (give title Other (specify below) below) VP & General Counsel			
			mendment, Date Original /lonth/Day/Year)			Ĺ	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)	(State)	(Zip) T			~		Person			
1.Title of Security (Instr. 3)	(State) 2. Transaction Date (Month/Day/Year)	2A. Deemed	3. Transacti Code) (Instr. 8)	4. Securi ioror Dispo (Instr. 3,	ities A sed of 4 and (A) or	cquired (A) (D)	ired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ly Owned 7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, \$.01 Par Value	02/18/2010		S	3,636 (1)	D	\$ 10.0166	62,146	D		

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

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 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Thomson David 28903 NORTH AVENUE PAINE VALENCIA, CA 91355			VP & General Counsel				
Signatures							

/s/ David Thomson 02/19/2010

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* 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).

(1) Transaction occurred pursuant to a 10B5-1 Plan entered into as part of a divorce settlement.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.