#### Shannon James Samuel Form 3 February 26, 2010 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Shannon James Samuel			<ul><li>2. Date of Event Requiring Statement</li><li>(Month/Day/Year)</li></ul>	3. Issuer Name and Ticker or Trading Symbol MANNKIND CORP [MNKD]					
(Last)	(First)	(Middle)	02/24/2010	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
28903 NORTH AVENUE							× • •		
PAINE				(Check	all applicable)				
	(Street)			OfficerOther (give title below) (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting		
VALENCIA, CA 91355							Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Securi (Instr. 4)	ty		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)									
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 control number.									
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security		4. Conversion or Exercise	1	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			(Instr. 4)		Price of	Derivative	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

(Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
r g t	Director	10% Owner	Officer	Other		
Shannon James Samuel 28903 NORTH AVENUE PAINE VALENCIA, CA 91355	ÂX	Â	Â	Â		
Signatures						

/s/ James S. 02/26/2010 Shannon

\*\*Signature of Reporting Person

# Date

**Explanation of Responses:** 

#### No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(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). \*\*

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### **Remarks:**

#### No securities are beneficially owned.

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.