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## **MANNKIND CORP**

### FORM 4/A

(Amended Statement Of Changes In Beneficial Ownership)

Filed 10/03/23 for the Period Ending 10/02/23

Address 1 CASPER STREET, DANBURY, CT, 06810

Telephone (727) 384-2323

- CIK 0000899460
- Symbol MNKD
- SIC Code 2834 Pharmaceutical Preparations
- Fiscal Year 12/31

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SEC	Form	4

FORM	4
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c).

Washington, D.C. 20549

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0287
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

See Instruction	n 10.			
1. Name and Add	dress of Reporting	Person*	2. Issuer Name <b>and</b> Ticker or Trading Symbol MANNKIND CORP [ MNKD ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last) 1 CASPER ST	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/02/2023	X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer
(Street) DANBURY (City)	CT (State)	06810 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year) 10/02/2023	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction	2A. Deemed	3.		4. Securities Acquired (A) or		5. Amount of		7. Nature of Indirect Beneficial Ownership	
	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (In		and 5)			Beneficially Owned Following		(D) or Indirect (I)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)
Common Stock, \$.01 Par Value	10/02/2023		S <sup>(1)</sup>		10,000	D	\$4.08(2)	2,359,147	D	

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

			(e.g., puts	s, calls	, w	arra	nts,	options, c	onvertib	le se	curitie	s)			
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. Transac Code (Ir 8)		of Deriv Secu Acqu (A) o Dispo of (D (Inst	lumber Expiration Date Ar f (Month/Day/Year) Se berivative iecurities Dr ccquired A) or (In bisposed 4)		Amount of Derivativ			derivative 0 Securities F Beneficially 0 Owned 0 Following (1	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Transaction occurred pursuant to Rule 10B5-1 Plan established December 19, 2022.

2. Correction of price.

**Remarks:** 

/s/ Michael Castagna 10/03/2023

Date

\*\* Signature of Reporting Person

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.