#### MANNKIND CORP

Form 5

February 01, 2017

## FORM 5

**OMB APPROVAL** 

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Check this box if

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Reported Form 4

Reported

(Last)

Transactions

Shannon James Samuel

1. Name and Address of Reporting Person \*

(First)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

\_X\_ Director

MANNKIND CORP [MNKD]

3. Statement for Issuer's Fiscal Year Ended

(Check all applicable)

(Month/Day/Year) 12/31/2016

Officer (give title below) below)

10% Owner Other (specify

25134 RYE CANYON LOOP

(Middle)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

#### VALENCIA, Â CA Â 91355

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person

(City)	(State) (	Zip) Tabl	e I - Non-Deri	ivative Sec	urities	Acqui	red, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit (A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, \$.01 Par Value	05/19/2016	Â	A4	39,200 (1)	A	\$0	51,000	D	Â
Common Stock, \$0.01 Par Value	05/19/2016	Â	A4	62,500 (2)	A	\$ 0	113,500	D	Â
Common Stock, \$0.01 Par	05/19/2016	Â	A4	9,375 (3)	A	\$0	122,875	D	Â

Value

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

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SEC 2270 (9-02)

# 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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	rivative Expiration Date curities (Month/Day/Year) quired (A) Disposed of ) str. 3, 4,		7. Title and Amo Underlying Secu (Instr. 3 and 4)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Ar or Nu of
Employee Stock Option	\$ 0.91	05/19/2016	Â	A4	78,400 Â	06/19/2016(4)	05/19/2026	Common Stock	7:

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
Shannon James Samuel 25134 RYE CANYON LOOP VALENCIA, CA 91355	ÂX	Â	Â	Â			

### **Signatures**

/s/ James S.
Shannon

\_\*\*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) Restricted Stock Units with 3-year vesting period; 1/36th vesting every month, being fully vested on the third anniversary of the grant date.
- (2) Annual retainer received in equity in lieu of cash. Restricted Stock Units shall vest on the earlier of retirement, removal from board, death or five years from grant date.
- (3) Annual retainer received in equity in lieu of cash. Restricted Stock Units shall vest on the earlier of retirement or removal from board, provided that such retirement or removal occurs more than one year after grant date; death; or five years from grant date.
- (4) Annual equity award vesting in 36 equal monthly installments commencing one month from date of grant, being fully vested on the third anniversary of grant date.

Reporting Owners 2

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Note: File three copies of this Form, one of which must be manually signed. If space provided 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.