Form 3 December 30, 2011								
December 30, 2011 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB APPROVAL		
	STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES					January 31		
Section 17(a) of	t to Section 16(a) of the the Public Utility Holdi 0(h) of the Investment C	ng Company	y Act of 193		response on	0.5		
(Print or Type Responses)								
1. Name and Address of Reporting Person <u>*</u> Mauro Anthony	2. Date of Event Requiring Statement (Month/Day/Year)	g 3. Issuer Name and Ticker or Trading Symbol MYLAN INC. [MYL]						
(Last) (First) (Middle)	12/30/2011	<b>D</b> (), <b>T</b>			lf Amendment, Date Original ed(Month/Day/Year)			
1500 CORPORATE DRIVE		(Check	all applicable	)				
(Street) CANONSBURG, PA 15317					5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip)	Table I - N	Non-Derivat	tive Securit	ies Benefi	cially Owned	1		
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature o Ownership (Instr. 5)	f Indirect Benef	ĩcial		
Common Stock	15,348 <u>(1)</u>		D	Â				

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

Mauro Anthony

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)

SEC 1473 (7-02)

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

Shares

(I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Mauro Anthony 1500 CORPORATE DRIVE CANONSBURG, PA 15317	Â	Â	President, North America	Â		
Signatures						
/s/ Anthony 12/3 Mauro	12/30/2011					
**Signature of Reporting Person	Date					

## **Explanation of Responses:**

\* 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).

(1) The reporting person's indirect ownership through 401(k) holdings as of December 30, 2011 was 5,574.

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.