FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20540	
wasnington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Cha Myoungil					2. Issuer Name and Ticker or Trading Symbol TANDEM DIABETES CARE INC TODA TODA TODA TODA TODA TODA TODA TODA									M Ch	5. Relationship of R Check all applicabl X Director		ng Pei	10% Ov	vner		
(Last) 12400 H	(Fi IGH BLUF		(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2023										Offic belo	er (give title w)		Other (s below)	specify	
(Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
SAN DII	EGO C	A 9	92130														n filed by Mo		•		
(City)	(S	tate) ((Zip)		Rul	Rule 10b5-1(c) Transaction Indication															
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	e I - Non	-Deriv	ative :	Sec	uriti	es Ac	qui	ired, C	isp	osed	of, or	Ben	eficia	lly Owr	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			, ,	Transaction Dis		Dispose	Securities Acquired (Asposed Of (D) (Instr. 3			Secur Benef Owne	icially d Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amoun	t (A) or D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(instr. 4)	
Common Stock 06/15/2					/2023					M		1,74	49 A		\$0		1,749		D		
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. Deeme Execution if any (Month/Day	Date,	4. Transacti Code (Ins 8)				6. Date Exercisa Expiration Date (Month/Day/Year		Amount of			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Dat Exe	te ercisable		piration ite	Title	0 N	Amount or Number of Shares						
Restricted Stock Unit ⁽¹⁾	(2)	06/15/2023			М			1,749		(3)		(3)	Comm Stock		1,749	\$0	3,498		D		

Explanation of Responses:

- 1. Awarded on June 15, 2022 pursuant to the Tandem Diabetes Care, Inc. 2013 Stock Incentive Plan, as amended, and the agreements related thereto (the 2013 Plan).
- 2. Each restricted stock unit (RSU) represents a contingent right to receive either one share of common stock of the Issuer or cash in lieu thereof, at the Issuer's discretion, in accordance with the terms of the 2013 Plan.
- 3. The total number of shares subject to the RSU will vest over a period of three years in equal annual installments on the anniversary of the grant, subject to the terms of the 2013 Plan.

Remarks:

/s/ Rachel Malina, Attorney-in-Fact for Myoungil Cha 06/16/2023

** Signature of Reporting Person Date

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.