FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D C	20540
vasnington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* BERGER DAVID B						2. Issuer Name and Ticker or Trading Symbol TANDEM DIABETES CARE INC [TNDM]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 12400 HIGH BLUFF DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 08/28/2023									^ below	,	Opera	Other (s below)			
(Street) SAN DII	EGO C.	A	92130		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ins									ant to a cor						
		Tabl	le I - No	n-Deriv	ative/	Sec	uriti	es Ac	quire	d, D	isp	osed o	of, o	r Be	neficia	lly Owne	d				
Da			Date	th/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Benefic Owned	es ially Following	Forn (D) o	n: Direct or Indirect onstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Coc	e V		Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common	Stock			08/28	3/2023	2023		M			407		A	\$0	5	5,799		D			
Common	Stock			08/28	3/2023				F ⁽¹)		141		D	\$27.0	06 5	5,658 D				
Common	Stock															242 I Fami				Berger Family Trust ⁽²⁾	
		Т		Deriva (e.g., p						,	•		,		-	y Owned			,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transa Code (8)				6. Date Exercisa Expiration Date (Month/Day/Yea			r) Am Sec Und Der		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable		opiration	Title		Amount or Number of Shares						
Restricted Stock	(4)	08/28/2023	08/28/	2023	M	407		(5			(5)	Common Stock 407		407	\$0	1,219		D			

Explanation of Responses:

- 1. Shares withheld by Tandem Diabetes Care, Inc. (the Company) to satisfy tax withholding requirements on vesting of restricted stock units (RSU). No shares were sold.
- 2. The securities are held by the Berger Family Trust dated April 16, 2008.
- 3. Awarded on May 27, 2020 pursuant to the Tandem Diabetes Care, Inc. 2013 Stock Incentive Plan, as amended, and the agreements related thereto (the 2013 Plan).
- 4. Each 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.
- 5. RSU vest as to twenty-five percent (25%) of the total number of shares subject to the RSU on 5/27/2021, and the remaining shares shall vest in twelve (12) equal quarterly installments thereafter.

Remarks:

/s/ Rachel Malina, Attorney-in-Fact for David B. Berger

08/30/2023

** 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.