FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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OMB APPROVAL											
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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). 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*				2. Issuer Name and Ticker or Trading Symbol TANDEM DIABETES CARE INC [ TNDM   (Check all applicable)  5. Relationship of Reporting Person(s) to Issuer (Check all applicable)											suer					
Sheridan John F					$\frac{1}{1}$	TANDEM DIABETES CARE INC [ INDM							JIVI	X Directo		or		10% Ov	wner	
(Last) (First) (Middle)															Officer pelow)	(give title		Other (s	specify	
(Last) 12400 H	ا-) IGH BLUF		(wildale)			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2024									,	PRESIDENT & CH		,		
						Amer	ndment	t, Date	of Origina	l Filed	d (Month/E	ay/Year)	6. Individual or Joint/Group Filing (Check Applicable)						pplicable	
(Street) SAN DII	EGO C	Δ .	92130											ne) X I	Form f	iled by One	e Repo	orting Perso	on	
SAN DII		A :	92130		-									Form filed by More than One Reporting Person						
(City) (State) (Zip)				Ru	Rule 10b5-1(c) Transaction Indication															
						Check	c this ho	nx to inc	, licate that a	trans	action was	made nursi	iant to a co	ntract in	netructi	on or writter	nlan ti	hat is intend	ed to	
														a contract, instruction or written plan that is intended to struction 10.						
		Tabl	e I - No	n-Deriv	/ative	Sec	uritie	es Ac	quired,	Dis	posed (	of, or B	eneficia	ılly O	wned	t				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,			Code (Instr.   5)			4 and Securit Benefic Owned		es ally Following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) o	r Price	Tr	eporte ansac istr. 3	etion(s) and 4)			(Instr. 4)	
Common Stock 02/27/2					7/2024	2024		М		819	A	\$0	) 30		0,181		D			
Common Stock 02/27/2				7/2024	2024		F <sup>(1)</sup>		293	D	\$27.	34	4 29,888			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
						calls	<del>,</del>					ible sec		1						
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			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)	Ownersh Form: Direct (D or Indirect (I) (Instr.	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amount or Number of Shares							
Restricted Stock Unit <sup>(2)</sup>	(3)	02/27/2024			М			819	(4)		(4)	Common Stock	819	\$	0	820		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. 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).
- 3. 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.
- 4. RSU vest as to twenty-five percent (25%) of the total number of shares subject to the RSU on May 27, 2021, and the remaining shares shall vest in twelve (12) equal quarterly installments thereafter.

## Remarks:

/s/ Rachel Malina, Attorney-in-02/29/2024 Fact for John F. Sheridan

\*\* 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.

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