FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	<b>OF CHANGE</b>	S IN BENEFIC	CIAL OWNERSH	<b>IIP</b>

- 1	OWD, WITH	O 17 (L				
	OMB Number:	3235-0287				
	Estimated average bur	den				
	hours per response:	0.5				

OMB APPROVAL

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

1. Name and Address of Reporting Person* TWOMEY CHRISTOPHER J					2. Issuer Name <b>and</b> Ticker or Trading Symbol TANDEM DIABETES CARE INC [ TNDM								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
1 1/ 01/	ILI CIII	CISTOTTILIC	<u>.                                    </u>		]									X Directo			10% O		
(Last)	(F	irst)	(Middle)										_	Officer below)	(give title		Other (: below)	specify	
C/O TANDEM DIABETES CARE, INC.,				3. Date of Earliest Transaction (Month/Day/Year) 11/16/2015															
11045 R	OSELLE S'	TREET			⊿ If	Δmer	ndment [	Date (	of Original Fi	ed (Month)	Day/\	Vear)	6 Ir	ndividual or J	nint/Group	Filino	(Check An	nlicable	
(Street)	EGO C.	A	92121		7	, uner	iament, i	Jule .	or Original Fr	cu (Mona)	Day	reary	Line	e) X Form fi	led by One	Repo	orting Perso	n	
(City)	(S	tate)	(Zip)											Person	1				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transac Date (Month/Da	Execution Date		Code (Instr. 5)			d (A) or r. 3, 4 and	Beneficia Owned F	es Formally (D) (Following (I) (I		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	Amoui	nt	(A) or (D)		Reported Transact (Instr. 3 a	ion(s)			(instr. 4)		
	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 Execution D if any (Month/Day/Year)			Co	Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		Of U D	7. Title and Ame of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
				Co	ode	v	(A)	(D)	Date Exercisable	Expiratio Date		itle	Amount or Number of Shares						
Stock Options <sup>(1)</sup>	\$10.13	11/16/2015			A		17,000		(2)	(3)		Common Stock	17,000	\$0.00	17,000	)	D		

## Explanation of Responses:

- 1. Granted pursuant to the Tandem Diabetes Care, Inc. 2013 Stock Incentive Plan.
- $2. \ All \ shares \ subject \ to \ the \ option \ will \ vest \ in \ equal \ monthly \ installments \ over \ 12 \ months.$
- 3. The expiration date for these options is 10 years from the date of grant.

## Remarks:

/s/ David B. Berger, Attorneyin-Fact for Christopher J.

11/17/2015

<u>Twomey</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.