FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL								
OMB Number:	3235-0287								
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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

1. Name and Address of Reporting Person*  Vosseller Leigh  (Last) (First) (Middle)  12400 HIGH BLUFF DRIVE					2. Issuer Name and Ticker or Trading Symbol  TANDEM DIABETES CARE INC  TNDM  3. Date of Earliest Transaction (Month/Day/Year)  11/27/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reporting Person(s) to Issuer Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  EVP & CHIEF FINANCIAL OFFICER  5. Individual or Joint/Group Filing (Check Applicable ine)					
(Street) SAN DII	EGO C	A	92130											X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(S		(Zip)	a Davis	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.											ed to			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		Code (Instr. 5)		red (A) or	r 5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 11				11/27	7/2023				M		406	A	\$0	12	12,440		D		
Common Stock 11/				11/27	/2023				F <sup>(1)</sup>		141	D	\$19.	12,299			D		
Common Stock													11,860			I .	Leigh A. Vosseller Trust <sup>(2)</sup>		
		Т	able II -								osed of converti			y Owned					
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. Transaction Code (Instr. 8)		n of		6. Date Expiration (Month/D	n Date	Amount of		of s ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ownersi Form: Ily Direct (I or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		expiration Pate	Title	Amount or Number of Shares						
Restricted Stock Unit <sup>(3)</sup>	(4)	11/27/2023			M			406	(5)		(5)	Common Stock	406	\$0	813		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 Leigh A. Vosseller Trust dated January 17, 2010, of which Leigh Vosseller is the Trustee.
- 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 Leigh A. Vosseller

11/29/2023

\*\* 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.