SEC Form 4	
------------	--

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden

0.5

hours per response:

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	ess of Reporting Perso	'n*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>TANDEM DIABETES CARE INC</u> [ TNDM	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BERGER DAVID B			]	X	Director Officer (give title below)	10% Owner Other (specify below)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		EVP, Bus Ops & Co	,			
C/O TANDEM DIABETES CARE, INC.			10/01/2021		L 11, Dus Ops & Co	inplance			
11075 ROSELLE STREET									
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Filing (Check Applicable				
(Street)	C A	00101		X	Form filed by One Repor	ting Person			
SAN DIEGO	CA	92121			Form filed by More than ( Person	One Reporting			
(City)	(State)	(Zip)							

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		on Disposed Of (D) (Instr. 3, 4 and tr. 5)		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) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	10/01/2021		<b>M</b> <sup>(1)</sup>		1,000	A	\$18.86	5,247	D	
Common Stock	10/01/2021		<b>S</b> <sup>(2)</sup>		1,000	D	\$118	4,247	D	
Common Stock								242	I	Berger Family Trust <sup>(3)</sup>

# 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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option	\$18.86	10/01/2021		м		1,000		(4)	(5)	Common Stock	1,000	\$18.86	75,000	D	

#### Explanation of Responses:

1. Represents shares of common stock received upon exercise of a stock option award.

2. The shares were sold pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 11, 2021.

3. The securities are held by the Berger Family Trust dated April 16, 2008.

4. The options vested as to fifty percent (50%) of the underlying shares on 6/14/2019, and the remaining shares vested in twelve (12) equal monthly installments thereafter.

5. The expiration date for these options is 10 years from the date of grant.

### **Remarks:**

David B. Berger \*\* Signature of Reporting Person <u>10/04/2021</u> Date

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

 $\ast$  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.