FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGE
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a
	or Coation 20(h) of the

S IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* TREU JESSE I					2. Issuer Name and Ticker or Trading Symbol TANDEM DIABETES CARE INC TODA TODA TODA TODA TODA TODA TODA TODA								heck all app	licable) tor	X	_	vner
	MAIN ASS	OCIATES, LLC	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/17/2014								Offic below	er (give title v)		Other (s	specify
ONE PA (Street) PRINCE (City)		J	08542 (Zip)		4. If Am	endment, l	Date	of Original F	iled	(Month/Da	ay/Year)		ne) X Form	filed by On	e Repo	g (Check Ap orting Perso n One Repo	n
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Transa Date			2. Transac Date Month/Da		Execution Date,		Code (li 8)				tr. 3, 4 ar	d Securi Benefi Owned Report Transa	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		vnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (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 Date, if any (Month/Day/Year)			Cod	ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivativ Security	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)			
				Cod	le V	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amoun or Numbe of Shares					
Stock Option (right to buy)	\$14.53	11/17/2014		A		17,000		(1)	1	1/17/2024	Common Stock	17,000	\$0	17,00	00	D	

Explanation of Responses:

1. The option vests in 12 equal monthly installments beginning on 12/17/2014.

Remarks:

Kathleen K. Schoemaker, 11/19/2014 Attorney-in-Fact

Date

** Signature of Reporting Person

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.