## Edgar Filing: HANSEN BRIAN B - Form 4

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Form 4	SKIAN B										
January 15,	2019										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO									OMB APPROVAL		
	UNITED		RITIES shingtor	OMMISSION	OMB Number:	3235-0287					
Check t if no lor subject Section Form 4 Form 5 obligati may cor <i>See</i> Inst 1(b).	nger to 16. or Filed pu ons ntinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								January 31, 2005Expires:2005Estimated average burden hours per response0.5	
(Print or Type	Responses)										
1. Name and HANSEN	2. Issuer Name <b>and</b> Ticker or Trading Symbol TANDEM DIABETES CARE INC [TNDM]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) C/O TANI INC.,, 110	3. Date of Earliest Transaction (Month/Day/Year) 01/15/2019					Director10% Owner XOfficer (give titleOther (specify below) below) EVP & CHIEF COMMERCIAL OFFICER					
SAN DIEC	Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	.Title of 2. Transaction Date 2A. Deemed Gecurity (Month/Day/Year) Execution Date, if		Date, if	Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/15/2019			Code V M	Amount 25,000 (1)	or (D) A	Price \$ 2.59	(Instr. 3 and 4) 26,381	D		
Common Stock	01/15/2019			S <u>(2)</u>	25,000	D	\$ 41.541	1 1,381	D		

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

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## 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)	Code	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 2.59	01/15/2019		М	25,000	(4)	(5)	Common Stock	25,000	\$

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
HANSEN BRIAN B C/O TANDEM DIABETES CARE, INC., 11075 ROSELLE STREET SAN DIEGO, CA 92121			EVP & CHIEF COMMERCIAL OFFICER					
Signatures								
David B. Berger, Attorney-in-Fact for Bria Hansen	n B.	01/	16/2019					
<b>**</b> Signature of Reporting Person			Date					
Explanation of Responses:								
* If the form is filed by more than one reporting person, <i>see</i> 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).
- (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 November 9, 2018.
- (3) The price reported reflects the weighted average price per share of multiple transactions with prices per share ranging between \$41.25 and \$41.93.
- (4) The option shall vest as to fifty percent (50%) of the underlying shares on 12/1/2018, and the remaining shares shall vest in twelve (12) equal monthly installments thereafter.
- (5) The expiration date for these options is 10 years from the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.