

TANDEM DIABETES CARE INC  
 Form 3  
 November 13, 2013

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Anacone Robert  
 (Last) (First) (Middle)

2. Date of Event Requiring Statement  
 (Month/Day/Year)  
 11/13/2013

3. Issuer Name and Ticker or Trading Symbol  
 TANDEM DIABETES CARE INC [TNDM]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original Filed(Month/Day/Year)

C/O TANDEM DIABETES CARE, INC., 11045 ROSELLE STREET  
 (Street)

(Check all applicable)

Director  10% Owner  
 Officer  Other  
 (give title below) (specify below)  
 EXECUTIVE VP AND CCO

SAN DIEGO, CA 92121  
 (City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable      Expiration Date	Title      Amount or Number of			

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				Shares		or Indirect (I) (Instr. 5)	
Incentive Stock Option <sup>(1)</sup>	Â <sup>(2)</sup>	Â <sup>(3)</sup>	Common Stock	7,460	\$ 11.73	D	Â
Incentive Stock Option <sup>(1)</sup>	Â <sup>(4)</sup>	Â <sup>(3)</sup>	Common Stock	6,863	\$ 10.72	D	Â
Incentive Stock Option <sup>(1)</sup>	Â <sup>(5)</sup>	Â <sup>(3)</sup>	Common Stock	5,968	\$ 7.04	D	Â
Incentive Stock Option <sup>(1)</sup>	Â <sup>(6)</sup>	Â <sup>(3)</sup>	Common Stock	158,749	\$ 1.11	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Anacone Robert C/O TANDEM DIABETES CARE, INC., 11045 ROSELLE STREET SAN DIEGO, CA 92121	Â	Â	Â EXECUTIVE VP AND CCO	Â

## Signatures

/s/ David B. Berger, Attorney-in-Fact for Robert B. Anacone

11/13/2013

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) Granted pursuant to the Issuer's Tandem Diabetes Care, Inc. 2006 Stock Incentive Plan.
- (2) The date of grant of the option was 3/16/2009. All shares subject to the option vested as to 25% on 2/17/2010 and in 36 equal monthly installments thereafter.
- (3) The expiration date for these options is 10 years from the date of grant.
- (4) The date of grant of the option was 8/20/2009. All shares subject to the option vested as to 25% on 8/20/2010 and in 36 equal monthly installments thereafter.
- (5) The date of grant of the option was 10/20/2011. All shares subject to the option vested as to 25% on 10/20/2012 and continue to vest in 36 equal monthly installments thereafter.
- (6) The date of grant of the option was 4/23/2013. All shares subject to the option will vest in 24 equal monthly installments commencing on 4/23/2013.

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.