

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
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<p>1. Name and Address of Reporting Person*</p> <p><u>NIGON RICHARD</u></p> <hr/> <p>(Last) (First) (Middle)</p> <p><u>1331 TYLER STREET NE, SUITE 200</u></p> <hr/> <p>(Street)</p> <p><u>MINNEAPOLIS MN 55413</u></p> <hr/> <p>(City) (State) (Zip)</p>	<p>2. Issuer Name and Ticker or Trading Symbol</p> <p><u>TACTILE SYSTEMS TECHNOLOGY INC [TCMD]</u></p>	<p>5. Relationship of Reporting Person(s) to Issuer (Check all applicable)</p> <p><input checked="" type="checkbox"/> Director 10% Owner</p> <p>Officer (give title below) Other (specify below)</p>
<p>3. Date of Earliest Transaction (Month/Day/Year)</p> <p><u>12/30/2016</u></p>		<p>6. Individual or Joint/Group Filing (Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p>Form filed by More than One Reporting Person</p>
<p>4. If Amendment, Date of Original Filed (Month/Day/Year)</p>		

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. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	12/30/2016		A		533 ⁽¹⁾	A	\$16.41 ⁽¹⁾	15,288	D	
Common Stock								5,175	I	By IRA ⁽²⁾
Common Stock								14,471	I	By SEP IRA ⁽³⁾
Common Stock								9,000	I	By Rollover IRA ⁽⁴⁾
Common Stock								66,470	I	By Trust ⁽⁵⁾

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	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					

Explanation of Responses:

- On December 30, 2016, the reporting person was granted 533 restricted stock units ("RSUs") in lieu of cash compensation of \$8,750.00 pursuant to Tactile Systems Technology, Inc.'s Non-Employee Director Compensation Policy. The RSUs are 100% immediately vested and may only be settled in shares of common stock on a one-for-one basis.
- Represents securities held by Stifel Nicolaus Custodian FBO Richard J. Nigon IRA Acct.
- Represents securities held by Stifel Nicolaus Custodian FBO Richard J. Nigon SEP IRA Acct.
- Represents securities held by Stifel Nicolaus Custodian for Richard Nigon / Rollover IRA.
- Represents securities held by Richard Nigon, Trustee of the Mary Nigon Revocable Trust under Agreement dated August 19, 2015.

/s/ Jonathan R. Zimmerman,
Attorney-in-Fact 01/04/2017

** 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.