## Edgar Filing: INTUITIVE SURGICAL INC - Form 4

INTUITIVE Form 4 December 06	SURGICAL INC								
FORM							PPROVAL		
	UNITED STAT	ES SECURITIES A Washington,		NGE (	COMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 1	er STATEMENT	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF					January 31, 2005 average ırs per		
Form 4 or Form 5 obligations may continue.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 19400.51(b).30(h) of the Investment Company Act of 1940							•		
(Print or Type R	Responses)								
1. Name and A SMITH LOI	ddress of Reporting Person NNIE M	Symbol	INTUITIVE SURGICAL INC			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 1266 KIFER	(First) (Middle) R ROAD	3. Date of Earliest Tra (Month/Day/Year) 12/01/2011				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chairman of the Board			
	(Street)	Filed(Month/Day/Year)			<ol> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ol>				
SUNNYVA	LE, CA 94086				Person	Note than one R	eporting		
(City)	(State) (Zip)	Table I - Non-D	erivative Securi	ities Aco	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	any		4. Securities onAcquired (A) of Disposed of (E (Instr. 3, 4 and (A)	))	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code V	or Amount (D)	Price	(Instr. 3 and 4)				
Common Stock	12/01/2011	J	6,970 A	\$0	283,857 <u>(1)</u>	D			
Common Stock	12/01/2011	J	6,970 D	\$0	120,523 <u>(1)</u>	I	by Trust		

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

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.

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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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
SMITH LONNIE M 1266 KIFER ROAD SUNNYVALE, CA 94086	Х		Chairman of the Board			
Signatures						

Lonnie M.	12/06/2011		
Smith			
**0. (	D (		

<u>\*\*</u>Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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).
- (1) Shares were distributed by GRAT No. 5 to the reporting person.

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.