Edgar Filing: INTUITIVE SURGICAL INC - Form 4

INTUITIVE Form 4 June 25, 201	SURGICAL INC										
FORM	Л								OMB APPROVAL		
	UNITEDS	Washington, D.C. 20549						OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 o	6. STATEMI	ENT OF CHA		GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 3 20 Estimated average burden hours per response 0			
Form 5 obligations may continue. See Instruction 1(b). 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 I	Responses)										
1. Name and Address of Reporting Person <u>*</u> SMITH LONNIE M			2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		[ISRC	[ISRG]				(Check an applicable)				
			3. Date of Earliest Transaction(Month/Day/Year)05/30/2014				X_ Director 10% Owner Officer (give title Other (specify below) below)				
	If Amendment, Date Original ed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person 						
SUNNYVALE, CA 94086 — Form filed by More than One Reporting Person											
(City)	(State) (Z	Zip) Ta	ble I - Non-D	erivative S	becurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned		
			Code	Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	05/30/2014		G	18,991	А	\$0	216,218 <u>(1)</u>	D			
Common Stock	05/30/2014		G	18,991	D	\$0	134,062 <u>(1)</u>	I	by Trust		

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)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int 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

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SMITH LONNIE M 1266 KIFER ROAD SUNNYVALE, CA 94086	Х						
Signatures							
By: Lori Serrano For: Lonnie M Smith	М	06/25/2014					
**Signature of Reporting Person		Date					
Evaloration of Deenenees.							

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 Lonnie M. Smith Equalization GRAT dated 5/21/13 to Lonnie Smith & Cheryl Smith, Community Property.

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.