## Edgar Filing: INTUITIVE SURGICAL INC - Form 4

INTUITIVE Form 4 March 16, 2	E SURGICAL INC	2									
FORM	ΛΔ								OMB AP	PROVAL	
	UNITED	RITIES AND EXCHANGE C shington, D.C. 20549				OMMISSION	OMB Number:	3235-0287			
Check th if no lon	ger STATEM	IFNT OF	CHAN	GES IN BENEFICIAL OW				NEDSHID OF	Expires:	January 31, 2005	
subject t Section	.0		CIIAN		SECURITIES				Estimated average burden hours per		
Form 4 Form 5								response	0.5		
obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section											
may con <i>See</i> Instr	lunue.			vestment	•	-	•				
1(b).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person _2. IssueRosa David J.Symbol				er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			INTUITIVE SURGICAL INC [ISRG]					(Check all applicable)			
				Date of Earliest Transaction				Director 10% Owner X_ Officer (give title Other (specify below) below) EVP & Chief Commercial Officer			
				(Month/Day/Year) 03/15/2017							
(Street) 4. If A			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mor	nth/Day/Year	)			Applicable Line) _X_ Form filed by O	ne Reporting Per	son	
SUNNYVA	ALE, CA 94086							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	<b>)</b> erivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date	··· ··· ··· ··· ··· ··· ··· ··· ··· ··				•	5. Amount of 6. 7. Nature o				
Security (Instr. 3)	(Month/Day/Year)	Execution any	Date, if	Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially Owned Following	Ownership Indirect Form: Direct Beneficia		
· · ·		(Month/D	ay/Year)						(D) or Indirect (I)	Ownership (Instr. 4)	
						(A)		Reported Transaction(s)	(Instr. 4)	(msu: I)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	03/15/2017			М	5,000	A	\$	8,222	D		
Stock							107.27				
Common Stock	03/15/2017			S <u>(1)</u>	5,000	D	\$ 750	3,222	D		

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day,	ate	7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Non-Qualified Stock Option (right to buy)	\$ 107.27	03/15/2017		М	5,000	(2)	02/17/2019	Common Stock	5,00

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Rosa David J. 1020 KIFER ROAD SUNNYVALE, CA 94086			EVP & Chief Commercial Officer				
Signatures							
By: Lori Serrano For: David J Rosa		03/16/2017					
**Signature of Reporting Person		Date					
Evalenation of De							

## **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) These shares were sold pursuant to a 10b5-1 Plan entered into on 11-10-16.
- (2) Non-statutory stock option granted pursuant to the 2010 Employee Stock Option Plan. The option vests 1/8th six months after the date of grant and 1/48th monthly thereafter.
- 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.