LEVY ALAN J Form 4 October 25, 2017

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB 3235-0287

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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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * LEVY ALAN J		2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (First) (M 1020 KIFER ROAD	liddle)	3. Date of Earliest Transaction (Month/Day/Year) 10/24/2017	_X_ Director 10% Owner Officer (give title below) Other (specify below)		
(Street) SUNNYVALE, CA 94086		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tab	ole I - Non-	Derivativ	e Secı	ırities Acquir	ed, Disposed of,	or Beneficially	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)			4. Securities Acquired (A) ction Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Form: Owned Direct Following or Ind	6. Ownership Form: Direct (D) or Indirect (I)	rm: Beneficial ect (D) Ownership
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	10/24/2017		M	936	A	\$ 123.7733	7,575 <u>(1)</u>	D	
Common Stock	10/24/2017		S(2)	936	D	\$ 371.3504	6,639 (1)	D	
Common Stock	10/24/2017		M	2,061	A	\$ 119.0633	8,700 (1)	D	
Common Stock	10/24/2017(1)		S(2)	2,061	D	\$ 371.3504	6,639	D	

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

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SEC 1474 (9-02)

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 Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-Qualified Stock Option (right to buy)	\$ 119.0633	10/24/2017	<u>(1)</u>	M	2,061	(3)	04/21/2021	Common Stock	2,06
Non-Qualified Stock Option (right to buy)	\$ 123.7733	10/24/2017		M	936	(3)	04/24/2024	Common Stock	936

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Hume / Hudress	Director	10% Owner	Officer	Other			
LEVY ALAN J 1020 KIFER ROAD SUNNYVALE, CA 94086	X						

Signatures

By: Lori Serrano For: Alan J Levy 10/25/2017

**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).
- On October 6, 2017, the common stock and equity grants of Intuitive Surgical split 3-for-1, resulting in the reporting person's ownership (1) of the company's stock and equity grants to increase (for every one share owned or granted, 2 additional shares were issued) and the exercise price of stock option grants to decrease to 1/3rd of the original grant price.
- (2) These shares were sold pursuant to a Rule 10b5-1 Trading Plan, entered into on November 29, 2016.

Reporting Owners 2

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Non-statutory stock option granted pursuant to the Non-Employee Directors' Stock Option Plan. Option shall vest 100% one year after the date of grant or at the next Shareholders Meeting, whichever should take place first, provided that vesting will cease on termination of the Directors service to the Company.

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.