## SEC Form 4

## FORM 4

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

OMB APPROVAL

ſ

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Addres <u>MEYERS W</u>			er Name <b>and</b> Ticker <u>JITIVE SUR</u>					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 950 KIFER ROA	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/24/2004						Officer (give title below)	Other below)	(specify )	
		4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) SUNNYVALE	CA	94086								Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)							Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
Date			2. Transaction Date (Month/Day/Year)	Execution Date, ay/Year) if any			3.4. Securities Acquired (A)Transaction Code (Instr. 8)Disposed Of (D) (Instr. 3, 4)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
				Code V		Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(orgi, paro, caro, marane, optiono, contention occurring)														
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. Transa Code ( 8)		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es d ed nstr.	6. Date Exerci Expiration Dat (Month/Day/Ye	e	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	Title	Amount or Number of Shares				
Stock Option (right to buy) <sup>(1)</sup>	\$3.69	12/11/2002		J		7,714		12/11/2003 <sup>(2)</sup>	12/11/2012	Common Stock	7,714	\$ <mark>0</mark>	7,714	D	
Stock Option (right to buy) <sup>(3)</sup>	\$16.62	03/24/2004		A		10,000		04/24/2004 <sup>(4)</sup>	03/24/2014	Common Stock	10,000	\$0	17,714	D	

Explanation of Responses:

1. Received in the Merger in exchange for a stock option to acquire common stock of Computer Motion, Inc. The share number and exercise price reflect the share number and exercise price of the related Computer Motion, Inc. stock option after the application of the merger exchange ratio of .51426943 and giving effect to the 1-for-2 reverse stock split of Intuitive Surgical common stock effected June 30, 2003. 2. Vests 1/4th each year after the date of grant.

3. Non-statutory stock option granted pursuant to the Non-Employee Directors' Stock Option Plan.

4. Vests in equal monthly installments over 36 months.

**Remarks:** 

/s/William C. Meyers

\*\* Signature of Reporting Person

03/26/2004

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.