FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20070

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average b	urden									
hours per response:	1.0									

Form 3 Holdings Reported.

Instruction 1(b)

Form 4 7	Transactions R	eported.	File	ed pursuant to or Sectior								f 1934						
Name and Address of Reporting Person* Brogna Salvatore				2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]						5. Relationship of Reporti (Check all applicable) Director				10%	Owner			
(Last) 1020 KIFI	(Fir ER ROAD	st) (I	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 01/04/2017					ear)	X Officer (give title below) Other (special below) EVP - Product Operations								
(Street) SUNNYV	'ALE CA)4086 Zip)	4. If Amen									i filed by O	erson				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Inst					Disposed (Securit Benefic		ties O			7. Nature of Indirect Beneficial Ownership		
								Amoun	Amount (A		Pı	rice	Is Ye	Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)
Common S	Stock		07/29/2016		J			1	(1)	Α	A \$447.		25 422		22		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp	r osed) r. 3, 4	Expiration (Month/Day				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amou or Numb of Title Share:		unt per		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership tt (Instr. 4)

Explanation of Responses:

 $1. \ The Filer purchased \ 1 \ share through \ the \ Employee \ Stock \ Purchase \ Program \ on \ 7/29/16, increasing \ his \ holdings \ to \ 422 \ shares.$

By: Lori Serrano For: Salvatore J Brogna

01/04/2017

** Signature of Reporting Person 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.