FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

							. ,				' '	01 194									
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>SMITH LONNIE M</u>									10101			110	ı		X Dir	ector		10% C	wner		
(Last) (First) (Middle) 1020 KIFER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 08/04/2016											cer (give title ow)		Other (specify below)			
,						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) SUNNYVALE CA 94086															Fo	Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)																Person					
		Tab	le I - Noi	n-Deriva	ative	Se	curitie	s Acq	uired,	Disp	osed o	f, or	Bene	eficia	ılly Owı	ned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da							2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		Disposed	rities Acquired (A) ed Of (D) (Instr. 3, 4			nd Secu Bene Own	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price		orted saction(s) r. 3 and 4)			(Instr. 4)		
Common Stock 08/04/							/2016		G ⁽¹⁾		14,44	5	D	\$0	.0	250,199					
Common Stock 08/04/						4/2016			G ⁽¹⁾		14,445 A		\$0	.0	74,326	I		by Trust			
		Ta	able II - I								sed of, onvertib				/ Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversior or Exercise Price of Derivative Security	cise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr 8)				6. Date E: Expiratio (Month/D	•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Date Exercisable

Expiration

Title

Explanation of Responses:

1. Shares from Lonnie Smith & Cheryl Smith, Community Property, were transferred to Lonnie M Smith Heartflow III GRAT dated 7/1/16, The Trust Company of Oxford, Trustee.

(D)

By: Lori Serrano For: Lonnie M Smith

08/12/2016

** Signature of Reporting Person

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.