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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no long	ger subject to
Section 16. Form 4 or F	orm 5
obligations may continu	e. 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 APPROVAL									
OMB Number:	3235-0287								
Estimated average burg	den								
hours per response:	0.5								

1. Name and Addres	ss of Reporting Perso <u>IARK J</u>	n*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>INTUITIVE SURGICAL INC</u> [ ISRG ]	(Check	tionship of Reporting Perse all applicable) Director Officer (give title	on(s) to Issuer 10% Owner Other (specify
(Last) (First) (Middle) 1020 KIFER ROAD		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/28/2014	X	below) SVP General Couns	below)
(Street) SUNNYVALE (City)	CA (State)	94086 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filing Form filed by One Repo Form filed by More than Person	rting Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock	10/28/2014		G		6	D	<b>\$0.0</b> <sup>(1)</sup>	679	D		
Common Stock	11/20/2014		G		11	D	<b>\$0.0</b> <sup>(1)</sup>	668	D		
Common Stock	11/25/2014		G		3	D	<b>\$0.0</b> <sup>(1)</sup>	665	D		
Common Stock	12/01/2014		G		2	D	<b>\$0.0</b> <sup>(1)</sup>	663	D		
Common Stock	12/02/2014		G		11	D	<b>\$0.0</b> <sup>(1)</sup>	652	D		
Common Stock	12/03/2014		G		25	D	<b>\$0.0</b> <sup>(1)</sup>	627	D		

## 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. Transa Code ( 8)	Instr.	of Deriv Secur Acqu (A) or Dispo of (D) (Instr	5. Number of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		7. Title Amour Securi Underl Deriva Securi and 4)	nt of ties ying	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				

Explanation of Responses:

1. A total of 58 shares were gifted during the period 10/28/14 to 12/3/14 to the following: on 10/28/14, 6 shares were gifted to Berlin Airlift Historical Foundation; on 10/20/14 a total of 11 shares were gifted between St. Anthony Foundation, ACLU Foundation, Saveabunny, and Second Harvest Food Bank; on 11/25/14 3 shares were gifted to UC Hastings College of Law; on 12/1/14, a total of 2 shares were gifted to George School and California Near Space Project; on 12/2/14 a total of 11 shares were gifted to Josephine Merz-Crew and Growing Hope; and on 12/3/14, 25 shares were gifted to Schwab Charitable Fund.

<u>Mark J Meltzer</u>

\*\* Signature of Reporting Person Date

12/09/2014

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.