FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  SMITH LONNIE M						2. Issuer Name <b>and</b> Ticker or Trading Symbol  INTUITIVE SURGICAL INC [ ISRG ]								(Che	elationshi eck all app K Dired	olicable)	ng Person(s) to Issuer  10% Owner		
(Last) 1020 KIF	ast) (First) (Middle) 020 KIFER ROAD							3. Date of Earliest Transaction (Month/Day/Year) 12/10/2014								er (give title w)	Other (specify below)		
(Street) SUNNY (City)	SUNNYVALE CA 94086						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tab	le I - Noi	n-Deriv	/ative	Se	curitie	es Acc	quired,	Dis	posed o	f, or	Bene	ficiall	y Own	ed			
Da					2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						Securi Benefi	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A (D	) or	Price	Transa	action(s) 3 and 4)		(111501.4)				
Common	0/2014	2014		G		1,069		A	\$0.0(1	24	40,744	D							
Common Stock 12/10						0/2014			G		1,069		D	\$0.0(1	) 10	02,031	I	by Trust	
		Ta									sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Executior if any (Month/Da	Date,	Date, Transaction Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)			Expiration Date	Title	Amor or Numl of Share	ber						

## **Explanation of Responses:**

1. Shares were distributed by Lonnie M. Smith Heartflow GRAT UA 12/05/2012 to Lonnie Smith & Cheryl Smith, Community Property.

By: Lori Serrano For: Lonnie M Smith

12/15/2014

\*\* 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.