FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPRO	VAL
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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* <u>SMITH LONNIE M</u>					2. Issuer Name and Ticker or Trading Symbol  INTUITIVE SURGICAL INC [ ISRG ]												o of Reporting Person(s) to Issuer blicable) etor 10% Owner				
(Last) 1020 KIF	ast) (First) (Middle) 20 KIFER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 08/31/2017											Officer (give title below)			Other (specify below)	
(Street) SUNNY (City)			94086 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Indi Line) X	Forn	al or Joint/Group Filing (Check Applicable form filed by One Reporting Person form filed by More than One Reporting Person			
		Tabl	e I - Nor	ı-Deriv	ative	Se	curit	ies A	Acqı	uired,	Disp	osed o	f, o	r Ber	nefic	ially	Owne	ed			
Dat			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)						ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Pri	ce	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 08/					1/2017	/2017				G <sup>(1)</sup>		4,841	1	A	\$	0.0	19	191,933		D	
Common Stock 08					1/2017	′2017				G		537		A	\$	0.0	192,470			D	
Common Stock 08,				08/3	1/2017	/2017				<b>G</b> <sup>(1)</sup>		4,841	1	D	\$	0.0	91,840			I	by Trust
Common Stock 08/				08/3	1/2017	./2017				<b>G</b> <sup>(2)</sup>		537		D	\$	0.0	91,303			I	by Trust
		Та	ıble II - C									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,		ransaction Code (Instr.				5. Date Ex Expiration Month/Da	n Date	ar)	or		f g g lnstr. 3	Der Sec (Ins	s. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(A) (D)				Expiration Date									

## **Explanation of Responses:**

- 1. Shares were distributed by Lonnie M. Smith Equalization GRAT II U/A 8/16/16, to Lonnie Smith & Cheryl Smith, Community Property.
- 2. Shares were distributed by Lonnie M. Smith Poly-Wood GRAT U/A 08/19/15, the Trust Company of Oxford, Trustee to Lonnie Smith & Cheryl Smith, Community Property.

By: Lori Serrano For: Lonnie 10/25/2017 M Smith

\*\* 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.