FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

intended to satisfy the affirmative

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: 3235-028										
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hours per response:	0.5									

	e conditions of																		
Name and Address of Reporting Person*     Rosa David J.					2. Issuer Name <b>and</b> Ticker or Trading Symbol INTUITIVE SURGICAL INC [ ISRG ]									k all app Direc	ship of Reporting applicable) irector		10% Ov		
(Last) (First) (Middle) 1020 KIFER ROAD			3. Date of Earliest Transaction (Month/Day/Year) 11/22/2024								<b>✓</b>	Officer (give title below)  Other (specify below)  President							
(Street) SUNNY (City)			4086 Zip)		4. If <i>F</i>	Amend	ment, [	Date of	f Origina	l Filed	l (Month/Da	y/Year	)	6. Ind Line)	Form	filed by On	e Rep	ng (Check A porting Personn One Repo	on
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	osed of	, or E	Benef	iciall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution		Date,	Code (Instr.					, 4 and Securi Benefi Owned		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D) P		rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 11/22/2					2024		<b>G</b> <sup>(1)</sup>		915	Ι	)	\$0.0	.0 211,080			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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ansaction of Derivative		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Date Exercisable

Expiration Date

## **Explanation of Responses:**

1. The filer gifted shares to The Rosa Donor Advised Fund.

By: Thanh Nhan Phan For: Rosa, David J

of Shares

11/22/2024

\*\* 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).

Code

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.

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