## Edgar Filing: INTUITIVE SURGICAL INC - Form 4

INTUITIVE SURGICAL INC Form 4 December 15, 2015 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction							OMB Number: Expires: Estimated burden hou response	Number:3235-0287Expires:January 31, 2005Estimated average burden hours per response0.5		
l(b). (Print or Type R	Responses)									
SMITH LONNIE M S			2. Issuer Name <b>and</b> Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			3. Date of Earliest Transaction (Month/Day/Year) 12/09/2015				_X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street) 4. If Ame Filed(Mon						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SUNNYVA	LE, CA 94086						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip) T	able I - Non-I	Derivative	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code		d (A) of d of (D 4 and (A) or	))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	12/09/2015		G	50	D	\$ 0 (1)	263,335	D		
Common Stock							63,540	I	by Trust	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

## Edgar Filing: INTUITIVE SURGICAL INC - Form 4

 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. Transacti Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
SMITH LONNIE M 1020 KIFER ROAD SUNNYVALE, CA 94086	Х						
Signatures							
By: Lori Serrano For: Lonnie M Smith	М	12/15/2015					
**Signature of Reporting Person		Date					

## **Explanation of Responses:**

- \* 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).
- (1) These shares were gifted from the account of Lonnie Smith & Cheryl Smith, Community Property to Michael Smith ACF Greyson Park Smith.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.