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 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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>Andersen Reiter Kara</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG] | | | | | | | | | all applic | cable) or | Person(s) to Iss 10% Over (| | vner |
|--|---|--|---|-------------------------------------|------------------------------|--|-------|---|---|-------------------------------|---|---|--------------------------------------|---|---|--|---|--|--|
| (Last) 1020 KII | ast) (First) (Middle) 20 KIFER ROAD | | | | | | | est Tra | nsactio | n (Mon | ith/Day/Year) | | X | Officer (give title Other (spe below) below) Sr VP General Counsel & CCO | | | · | | |
| (Street) SUNNY (City) | | | 94086 (Zip) | 5 | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Individual or Joint/Group Filing (Check- ine) X Form filed by One Reporting Perform filed by More than One R Person | | | | | n |
| (0.5) | | | | Non-Deri | vative | e Sec | uriti | ies A | cauir | ed. D | isposed o | of. or E | Benefici | ally (| Owned | <u> </u> | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transacti Date (Month/Day/ | on (Year) | 2A. De | | ate, | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | 5. Amo Securit Benefic Owned | | unt of es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | Ī | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock | | | | |)19 | 19 | | | M ⁽¹⁾ | | 1,500 | Α | \$170.7 | 0.7567 | | 5,218 | | D | |
| Common Stock 10/22/2019 | | | | | | 9 | | | S ⁽¹⁾ | | 1,500 | D | \$553.29 | .2941(2) | | 3,718 | | D | |
| Common | Stock | | | 10/22/20 |)19 | | | | S ⁽¹⁾ | | 542 | D | \$557. | 15 | 3,176 D | | | | |
| | | 7 | able | | | | | | | | sposed of , converti | | | | wned | | | | |
| 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) | | | vative urities uired or oosed o) tr. 3, 4 | Expir | te Exer ation D th/Day/ | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly i | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Expiration Date | Title | Amour or Numbe of Shares | er | | | | | |
| Non- Qualified Stock Option (right to | \$170.7567 | 10/22/2019 | | | M ⁽¹⁾ | | | 1,500 | (| (3) | 02/06/2025 | Commo Stock | | 0 | \$0.0 | 4,500 | | D | |

Explanation of Responses:

- 1. These shares were sold in accordance with a Trading Plan that complies with SEC Rule 10b5-1 and expires on March 16, 2020
- 2. The average selling price for the transactions was \$553.2941 The shares sold at: \$545.00.00 \$545.99 = 154 shares; \$547.00 \$547.99 = 100 shares; \$550.00 \$550.99 = 600 shares; and \$558.00 to \$558.99 = 646 shares.
- 3. Non-statutory stock option granted pursuant to the 2010 Employee Stock Option Plan. The option vests 1/8th six months after the date of grant and 1/48th monthly thereafter.

By: Lori Serrano For: Kara 10/23/2019 Andersen Reiter

** 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.