FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

Vashington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 0.5 hours per response:

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

Name and Address of Reporting Person*     Samath Jamie						2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ ISRG ]							(Ch	Relationship of the control of the c	cable)	g Persor	n(s) to Issi 10% Ow Other (s	/ner
(Last) 1020 KII	(F FER ROAI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/10/2024								below)				
(Street)	VALE C	A	94086		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(\$	State)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Tab	le I - No	n-Deriv	vative	Sec	uriti	ies Ac	quired	Dis	sposed o	of, or Be	neficial	ly Owned	t			
Date			2. Transa Date (Month/E	Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		Benefici	es ally Following	6. Own Form: I (D) or I (I) (Inst	Direct of ndirect it. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			
Common Stock 02/10				/2024	24		M <sup>(1)</sup>		1,078	A	\$0.0	7,	7,314		D			
Common Stock 02/10				/2024	)24		F <sup>(1)</sup>		401	D	\$388.2	22 6,	6,913		D			
		T	able II -									, or Ben ible secu		Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,		ransaction ode (Instr.		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy D	0. Ownership Form: Direct (D) Ir Indirect () (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Restricted Stock Units	\$0.0	02/10/2024			M			1,078	(2)		(2)	Common Stock	1,078	\$0.0	3,232		D	

## **Explanation of Responses:**

- 1. RSUs vest 25% per year over a four year period, commencing on each anniversary of February 10, 2023. RSUs convert into common stock on the vest date on a one-for-one basis. 25% of the shares have been released and a portion of the shares were held back to cover the statutory tax withholding requirements. The net shares were deposited into the holders account
- 2. Constitute restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of Issuer common stock upon vesting. 25% of the RSUs shall vest on each anniversary of February 10, 2023, subject to Reporting Person's continuous service to the Issuer through each such vesting date.

By: Donna Spinola For: Samath, Jamie

02/12/2024

\*\* 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).

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.