FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|
| 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>Johnson Amal M</u> | | | | 2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG] | | | | | | | | | k all app | , | | | | | |
|--|--|--|---|--|------------------------------|---|--|--|------|---|--------|---|---|--|---|---|---------------------------------------|--|------------|
| (Last) 1020 KII | (Fi FER ROAI | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/25/2020 | | | | | | | | | Office belov | er (give title /) | e Other (sp below) | | specify |
| (Street) SUNNY (City) | | | 4086 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi Line) X | Form Form | ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Execution Dat | | Date, | 3. 4. Securitie Transaction Disposed C Code (Instr. 5) | | | | | 5. Amo Securit Benefic Owned Report | ies cially Following | Forn (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Transa | action(s) . 3 and 4) | | | (11301. 4) |
| Common Stock 08/2 | | | | 08/25/ | 2020 | | | G ⁽¹⁾ | | 6,000 D | |) | \$0.0 | 3,468 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deer Execution if any (Month/I | | 4. Transa Code (8) | action of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Ownership | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | | | Date Exercisa | able | Expiration of Date Title Sh | | of Share | es | | | | | | |

Explanation of Responses:

1. This transaction involved a gift of securities by the reporting person to her daughter, who lives outside of the reporting person's household. The reporting person no longer has beneficial ownership of these shares.

> By: Donna Spinola For: Amal M. Johnson

08/26/2020

** 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.