SEC F	orm 4
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## FORM 4

obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 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	STATEMENT OF CHANGES IN
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the S

oursuant 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 <sup>*</sup> Brosius Mark					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>INTUITIVE SURGICAL INC</u> [ ISRG ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					
(Last)					3. Date of Earliest Transaction (Month/Day/Year) 02/26/2024									Х	below)		g an	below)	` ´	
1020 KIFER ROAD				_ 4. lf	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street) SUNNY	VALE C	A 9	94086	_										Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si	ate)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication														
Check this box to indicate that a transaction was made pursuant to a contract, instruction satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										on or written	plan ti	hat is intende	d to							
		Tab	le I - No	n-Deriv	vative	e Se	curitie	s Ac	quir	ed, I	Dis	posed c	of, or B	enefici	ally	Owned	l			
1. Title of Security (Instr. 3) 2. Transau Date (Month/Date)					ur) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			, 4 and 5) Securiti Benefic Owned		es For ally (D) Following (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Co	de \	/	Amount	(A) o (D)	Price	,	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			02/26	2/26/2024				М	(1)		855	A	\$(	).0	1,	,564		D		
Common Stock 0			02/26	26/2024				F	(1)		434	D	\$38	9.77	77 1,130			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)	ivative Conversion Date Execution Date, 1 urity or Exercise (Month/Day/Year) if any			4. Transac Code (I 8)			6. Date Exercis: Expiration Date (Month/Day/Yea			Amount of		of s 1g e Securit	De Se (In	Price of erivative ecurity listr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		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	Amou or Numb of Shares	er					
Restricted Stock Units - 2- 26-2021	\$0.0	02/26/2024			М			855	(	(2)		(2)	Common Stock	855		\$ <u>0.0</u>	855		D	
Restricted Stock Units - 2- 26-2024	\$0.0	02/26/2024			Α		6,487		(	(2)		(2)	Common Stock	6,48	7	\$0.0	6,487		D	

Explanation of Responses:

1. RSUs vest 25% per year over a four year period, commencing on the first anniversary of the grant date. 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. Each RSU granted represents a contingent right to receive one share of Intuitive Surgical common stock. The grant vests 25% on the first anniversary of the date of grant and annually thereafter, over a four year period.

By: Donna Spinola For:	
Brosius, Mark	

02/27/2024

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.