Edgar Filing: Andersen Reiter Kara - Form 4

Andersen Rei Form 4	iter Kara									
Form 4 February 21,	2019									
	Л									PPROVAL
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Section 16. Form 4 or Form 5 Filed pursuant to Section				HANGES IN BENEFICIAL OWNERSHI SECURITIES on 16(a) of the Securities Exchange Act of 1					Expires: Estimated a burden hou response	irs per
may conti <i>See</i> Instru 1(b).	nue. Section 17(a)			ility Holdi vestment (•	- ·		f 1935 or Sectio 40	'n	
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> Andersen Reiter Kara			2. Issuer Name and Ticker or Trading Symbol INTUITIVE SURGICAL INC [ISRG]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (First) (Middle) 3. Date of				e of Earliest Transaction h/Day/Year)				Director 10% Owner Officer (give title Other (specify below) below) Sr VP General Counsel & CCO		
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
SUNNYVA	LE, CA 94086							Form filed by M Person	More than One Re	eporting
(City)	(State) (Z	Zip)	Table	e I - Non-De	erivative S	Securi	ties Aco	quired, Disposed o	f, or Beneficial	llv Owned
1.Title of Security (Instr. 3)	any			3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			Securities H Beneficially (Owned H Following (6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	02/19/2019			M <u>(1)</u>	750	А	\$0	5,210	D	
Common Stock	02/19/2019			F <u>(1)</u>	372	D	\$0	4,838	D	

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

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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. 5. Number Transaction Code Derivative (Instr. 8) 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 Underlying Securities (Instr. 3 and 4)		8. F Der Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	\$ 0	02/19/2019		М	750	(2)	02/16/2020	Common Stock	750	

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 0	Director	10% Owner	Officer	Other		
Andersen Reiter Kara 1020 KIFER ROAD SUNNYVALE, CA 94086			Sr VP General Counsel & CCO			
Cianaturaa						

Signatures

Kara Andersen Reiter	02/21/2019			
<u>**</u> 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).
- On 2/16/16, RSU shares were granted, vesting 25% per year over a four year period. RSUs convert into common stock on the vest date on
 a one-for-one basis. On 2/16/19, 25% of the shares were released and a portion of the shares were held back to cover the statutory tax withholding requirement. The net shares were deposited into the holders account.

Each Restricted Stock Unit, granted pursuant to the 2010 Employee Stock Option Plan, represents a contingent right to receive one share(2) 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 of time.

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.