Myriam Curet Form 5

### January 24, 2019 FORM 5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB APPROVAL** 

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1.0

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5. Relationship of Reporting Person(s) to

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

### ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Washington, D.C. 20549

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

Form 4 Transactions Reported

Myriam Curet

1. Name and Address of Reporting Person \*

securities beneficially owned directly or indirectly.

Reported

1(b).

<b>,</b>		INTUIT [ISRG]	INTUITIVE SURGICAL INC [ISRG]  3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2018				(Check all applicable)				
(Last)	(First) (M	(Month/D					Director X Officer (give below)	0% Owner ther (specify			
1020 KIFEI	R ROAD						EVI & C	Chief Medical O	THEE		
	(Street) 4. If Amendm Filed(Month/D			<del>-</del>			6. Individual or Joint/Group Reporting				
							(check applicable line)				
	LE, CA 9408						_X_ Form Filed by Form Filed by Person	One Reporting P More than One R			
(City)	(State)	(Zip) Tabl	e I - Non-Deri	vative Sec	uritie	s Acqu	ired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3,	(A) of (D	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	09/13/2018	Â	G <u>(1)</u>	30	D	\$ 0	1,940	D	Â		
Reminder: Ren	oort on a separate line	for each class of	Persons wh	o respon	d to t	the co	llection of info	rmation	SEC 2270		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

contained in this form are not required to respond unless

the form displays a currently valid OMB control number.

(9-02)

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1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)		4. Transaction Code	5. Number of	6. Date Exerc Expiration Do (Month/Day/	ate	7. Title Amou Under	nt of	8. Price of Derivative Security	
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e	. va.,	Securi	, ,	(Instr. 5)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<u>.</u>	Director	10% Owner	Officer	Other			
Myriam Curet 1020 KIFER ROAD SUNNYVALE, CA 94086	Â	Â	EVP & Chief Medical Officer	Â			

# **Signatures**

By: Lori Serrano For: Myriam
Curet
01/24/2019

\*\*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).
- (1) The shares were donated to the United Methodist Church of Los Altos by the filer.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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