

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number: 3046-0049
Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT
CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
A318242

EMPLOYER NAME
INTUITIVE SURGICAL INC

ADDRESS
1020 KIFER ROAD

CITY/TOWN
SUNNYVALE

STATE
CA

ZIP CODE
94086

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID

HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

CITY/TOWN

STATE

ZIP CODE

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)

770416645

SECTION E – EMPLOYER FILING ELIGIBILITY

YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS

SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)

Unique Entity ID (UEI): UNAVAILABLE

YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor)

YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor)

YES (One or More Non-Headquarters Establishments is Federal Contractor)

SECTION G – NAICS INFORMATION

339112 - Surgical and Medical Instrument Manufacturing

SECTION H – WORKFORCE DEMOGRAPHIC DATA

JOB CATEGORIES	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
			Male						Female						
	Male	Female	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
Executive/Senior Level Officials and Managers	3	3	79	1	6	0	0	3	22	2	8	0	0	0	127
First/Mid-Level Officials and Managers	83	36	534	34	261	6	3	24	246	21	172	2	0	15	1437
Professionals	163	99	949	64	893	10	7	86	477	75	537	6	2	48	3416
Technicians	121	54	169	61	207	14	2	23	23	17	69	0	0	2	762
Sales Workers	44	25	542	33	9	1	4	12	331	7	12	0	4	8	1032
Administrative Support Workers	6	12	28	5	13	1	0	3	55	11	24	0	0	6	164
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	109	77	73	34	279	9	1	15	29	18	224	5	1	4	878
Laborers and Helpers	42	26	36	22	66	3	1	4	12	13	27	0	0	5	257
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	571	332	2410	254	1734	44	18	170	1195	164	1073	13	7	88	8073
PRIOR 2022 REPORTING YEAR TOTAL	364	199	2288	228	1565	44	31	292	1103	146	992	13	8	170	7443

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/17/2023 - 12/31/2023

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)

Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

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CITY/TOWN
SUNNYVALE

STATE
CA

ZIP CODE
94086

CERTIFICATION COMMENTS (optional)

Intuitive Surgical has 20 Employees who self-identified as Non-binary/third gender. We have identified these employees in the comments section of their respective physical worksites.

CERTIFICATION STATEMENT

"I certify that the information, including any workforce demographic data, provided in this report is correct and true to the best of my knowledge and was prepared in conformity with the directions set forth in the form and accompanying instructions."

Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.

DATE OF CERTIFICATION

6/4/2024 10:30 AM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

██████████

Title of Certifying Official

██████████

Email Address of Certifying Official

██████████@intusurg.com

Telephone Number of Certifying Official

██████████

PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING

Name of Primary POC

██████████

Title and Employer of Primary POC

██████████

Intuitive Surgical

Email Address of Primary POC

██████████@intusurg.com

Telephone Number of Primary POC

██████████