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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See |
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| Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

| 1. Name and Address of Reporting Person [*] LEVANDE ROBERT | | | 2. Issuer Name and Ticker or Trading Symbol <u>INTEGRATED SURGICAL SYSTEMS</u> <u>INC</u> [ISSM.PK] | | tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owne | | |
|--|-------------------|-----------------|---|------------------------|---|-----------------------|--|
| (Last) 8 EAST 67TH | (First) STREET | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 07/14/2014 | | Officer (give title below) | Other (specify below) | |
| (Street) NEW YORK (City) | V YORK NY 10021 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | , , | | |
| | | Table I - Non-D | erivative Securities Acquired, Disposed of, or Ben | eficially | Owned | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|---------------------------------|--|---|------|---|--|---------------|----------------------------|---|---|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 07/14/2014 | | Α | v | 36,063 | Α | \$0.16 | 660,975 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and Expiration Date (Month/Day/Year) 1. Title of 9. Number of 7. Title and 3. Transaction 3A. Deemed 5. Number 8. Price of 10. 11. Nature Derivative Security (Instr. 3) Transaction Code (Instr. 8) Amount of Securities Conversion Execution Date Derivative derivative Ownership of Indirect Date (Month/Day/Year) of Derivative Security (Instr. 5) or Exercise if anv Securities Form: Beneficial Beneficially Owned Price of Derivative (Month/Day/Year) Securities Underlying Direct (D) Ownership (Instr. 4) Acquired (A) or Disposed or Indirect (I) (Instr. 4) Derivative Following Reported Security Security (Instr. 3 and 4) of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount o Number Expiration Date of v Code (A) (D) Exercisable Date Title Shares

Explanation of Responses:

/s/ Robert Levande

08/04/2014

Date

** Signature of Reporting Person

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.