## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## 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 ner response.	05						

1. Name and Address of Reporting Person* <u>LEVANDE ROBERT</u>			2. Issuer Name and Ticker or Trading Symbol <u>INTEGRATED SURGICAL SYSTEMS</u> <u>INC</u> [ISSM.PK]		ationship of Reporting Pe k all applicable) Director	10% Owner	
(Last) 8 EAST 67TH	(First) STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/17/2013		Officer (give title below)	Other (specify below)	
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)			
NEW YORK	NY	10021 (Zip)		X	Form filed by One Reporting Person		
(City)	(State)		—		Form filed by More th Person	an One Reporting	
		Table I - Non-D	erivative Securities Acquired, Disposed of, or Bene	ficially	Owned		

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		Securities Beneficially	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	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	01/17/2013		Α		31,250	Α	\$0.2	430,656	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) 8. Price of Derivative 9. Number of 1. Title of 3. Transaction 7. Title and 11. Nature 3A. Deemed 5. Number 10. Derivative Security (Instr. 3) Transaction Code (Instr. 8) Amount of Securities Conversion Date (Month/Day/Year) Execution Date derivative Ownership of Indirect of Derivative or Exercise Price of Derivative Security (Instr. 5) if anv Securities Form: Beneficial Beneficially Owned Direct (D) or Indirect (I) (Instr. 4) (Month/Day/Year) Securities Underlying Ownership (Instr. 4) Acquired (A) or Disposed Derivative Following Reported Security Security (Instr. 3 and 4) of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount or Number Expiration Date of ν Code (A) (D) Exercisable Date Title Shares

Explanation of Responses:

/s/ Robert Levande

03/13/2013 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.