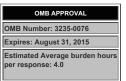
FORM D

Notice of Exempt Offering of Securities

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.



1. Issuer's Identity			
CIK (Filer ID Number)	Previous Name(s)	None None	Entity Type
0001266806]		Corporation
Name of Issuer			C Limited Partnership
SECOND SIGHT MEDICAL PRODUCTS INC]		C Limited Liability Company
Jurisdiction of Incorporation/Organization	_		C General Partnership
CALIFORNIA	٦		O Business Trust
Year of Incorporation/Organizatio	⊐ ⊃n		C Other
• Over Five Years Ago			
• Within Last Five Years (Specify Year)			

C Yet to Be Formed

2. Principal Place of Business and Contact Information Name of Issuer SECOND SIGHT MEDICAL PRODUCTS INC Street Address 1 Street Address 2 [13170 Telfair Avenue City State/Province/Country ZIP/Postal Code Phone No. of Issuer [Sylmar] [21342]

3. Related Persons

Last Name		First Name		Middle Name
Dunbar		Scott		٦
Street Address 1			Street Address 2	
13170 Telfair Avenue	e			
City		State/Province/	Country	ZIP/Postal Code
Sylmar		CALIFORNI	A	91342
Relationship:	Execut	ive Officer	Director	Promoter
Clarification of Response	e (if Necessary)		
Acting CEO				
Last Name		First Name		Middle Name
Williams		Gregg		
Street Address 1			Street Address 2	
13170 Telfair Ave				
City		State/Province/	Country	ZIP/Postal Code
Sylmar		CALIFORNI	A	91342

Relationship:		Executive Officer	Director	Promoter	
<u>.</u>					
Clarification of Response	e (if Nec	essary)			
					_
Last Name		First Name		Middle Name	
Mendelsohn		Aaron			
Street Address 1			Street Address 2	2	
13170 Telfair Ave				-	٦
City		State/Province	/Country	ZIP/Postal Code	_
Sylmar		CALIFORN	ÍA	91342	
Relationship:		Executive Officer	Director	Promoter	
Clarification of Response	e (if Nec	cessarv)			<u>`</u>
-					
					-
Last Name		First Name		Middle Name	
McGuire		Jonathan		Will	
Street Address 1			Street Address 2	2	_
13170 Telfair Ave					
City		State/Province	/Country	ZIP/Postal Code	1
Sylmar		CALIFORN	iA	91342	
Dubernation			Director		
Relationship:		Executive Officer	Director	Promoter	
Clarification of Response	e (if Nec	essary)			
					-
Last Name		First Name		Middle Name	
Pfeffer		FII SU INAILLE			
Cérrent à d'àrrain d		Matthew			
Street Address 1			Street Address 2	2	
Street Address 1 13170 Telfair Ave			Street Address 2	2	
				2 ZIP/Postal Code	
13170 Telfair Ave		Matthew	/Country		
13170 Telfair Ave City		State/Province	/Country	ZIP/Postal Code	
13170 Telfair Ave City		State/Province	/Country	ZIP/Postal Code	
13170 Telfair Ave City Sylmar	- A	Matthew State/Province CALIFORN Executive Officer	/Country	ZIP/Postal Code	
13170 Telfair Ave City Sylmar Relationship:	- A	Matthew State/Province CALIFORN Executive Officer	/Country	ZIP/Postal Code	
13170 Telfair Ave City Sylmar Relationship:	- A	Matthew State/Province CALIFORN Executive Officer	/Country	ZIP/Postal Code	
13170 Telfair Ave City Sylmar Relationship:	- A	Matthew State/Province CALIFORN Executive Officer	/Country	ZIP/Postal Code]
13170 Telfair Ave City Sylmar Relationship:	- A	Matthew State/Province CALIFORN Executive Officer essary) First Name	/Country	ZIP/Postal Code]
13170 Telfair Ave City Sylmar Relationship: Clarification of Response	- A	State/Province State/Province CALIFORNI Executive Officer :essary)	/Country	ZIP/Postal Code]
13170 Telfair Ave City Sylmar Relationship: Clarification of Response Last Name Sedo Street Address 1	- A	Matthew State/Province CALIFORN Executive Officer essary) First Name	/Country	ZIP/Postal Code 91342 Promoter Middle Name]
13170 Telfair Ave City Sylmar Relationship: Clarification of Response Last Name Sedo Street Address 1 13170 Telfair Ave	- A	Matthew State/Province CALIFORNI Executive Officer Sessary) First Name Edward	/Country IA Director Street Address 2	ZIP/Postal Code 91342 Promoter Middle Name 2]
I 3170 Telfair Ave City Sylmar Relationship: Clarification of Response Last Name Last Name Sedo Street Address 1 I 3170 Telfair Ave City	- A	Matthew State/Province CALIFORNI Executive Officer ressary) First Name Etadward State/Province	/Country IA Director Street Address 2 (Country	ZIP/Postal Code 91342 Promoter Middle Name 2 ZIP/Postal Code	
13170 Telfair Ave City Sylmar Relationship: Clarification of Response Last Name Sedo Street Address 1 13170 Telfair Ave	- A	Matthew State/Province CALIFORNI Executive Officer Sessary) First Name Edward	/Country IA Director Street Address 2 (Country	ZIP/Postal Code 91342 Promoter Middle Name 2]
I 3170 Telfair Ave City Sylmar Relationship: Clarification of Response Last Name Last Name Sedo Street Address 1 I 3170 Telfair Ave City	e (if Nec	Matthew State/Province CALIFORNI Executive Officer ressary) First Name Etadward State/Province	/Country IA Director Street Address 2 (Country	ZIP/Postal Code 91342 Promoter Middle Name 2 ZIP/Postal Code	

Acting Chief Accounting Officer

4. Industry Group

C Agriculture

Banking & Financial Services

- C Commercial Banking
- C Insurance
- C Investing
- C Investment Banking
- C Pooled Investment Fund
- Other Banking & Financial C Services

C Business Services

Energy

- C Coal Mining
- C Electric Utilities
- C Energy Conservation
- C Environmental Services
- C Oil & Gas
- C Other Energy

C Biotechnology

- 0 Health Insurance
- Hospitals & Physicians 0

Health Care

C Manufacturing

Real Estate

0

C Commercial

C Construction

C REITS & Finance

C Other Real Estate

Residential

- 0 Pharmaceuticals
- G. Other Health Care
- Technology C Computers

C Retailing

C Restaurants

- C Telecommunications
- C Other Technology

Travel

- C Airlines & Airports
- C Lodging & Conventions
- C Tourism & Travel Services
- C Other Travel

C Other

5. Issuer Size

Revenue Range

- \odot No Revenues
- C \$1 - \$1,000,000
- C \$1,000,001 - \$5,000,000
- C \$5,000,001 - \$25,000,000
- C \$25,000,001 - \$100,000,000
- C Over \$100,000,000
- C Decline to Disclose
- Not Applicable C

Aggregate Net Asset Value Range

- C No Aggregate Net Asset Value
- 0 \$1 - \$5,000,000
- C \$5,000,001 - \$25,000,000
- \$25,000,001 \$50,000,000 C
- C \$50,000,001 - \$100,000,000
- 0 Over \$100,000,000
- C Decline to Disclose
- C Not Applicable

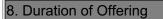
6. Federal Exemption apply)	n(s) and Exclusion(s) Claimed (select all that
Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505
Rule 504 (b)(1)(i)	Rule 506(b)
Rule 504 (b)(1)(ii)	Rule 506(c)
Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)
	Investment Company Act Section 3(c)

2021-03-26

7. Type of Filing

New Notice Date of First Sale First Sale Yet to Occur

Amendment



9.	Type(s) of Securitie	es (Offered (select all that apply)
Γ	Pooled Investment Fund Interests	•	Equity
Γ	Tenant-in-Common Securities	\Box	Debt
Γ	Mineral Property Securities	Γ	Option, Warrant or Other Right to Acquire Another Security
Π	Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security		Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination	0	Voc	• No	
transaction, such as a merger, acquisition or exchange offer?	×./	res	INC)

Clarification of Response (if Necessary)

11. Minimum Investment		
Minimum investment accepted from any outside investor	\$ 0	USD

12. Sales Compensation	
Recipient	Recipient CRD Number 🔲 None
ThinkEquity, a division of Fordham Financial Management, Inc.	20996
(Associated) Broker or Dealer V None	(Associated) Broker or Dealer CRD None
Street Address 1	Street Address 2
17 Battery Place, South	Suite 643
City Stat	e/Province/Country ZIP/Postal Code
New York	EW YORK 10004
State(s) of Solicitation 🔽 All States 🔽 Fo	oreign/Non-US

13. Offering a	nd Sales Amounts
Total Offering Amount	\$ 27900000 □ USD □ Indefinite
Total Amount Sold	\$ 27900000 USD
Total Remaining to be Sold	\$ USD 🗆 Indefinite
Clarification of Respons	e (if Necessary)
14. Investors	

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors,



Number of such non-accredited investors who already have invested in the offering

Γ

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

		_
	 	_

15. Sales Commissions & Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$	1813500	USD	•	Estimate
Finders' Fees	\$	0	USD	Π	Estimate
Clarification of Response (if Necessar	y)				

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

-	\$ 	USD	Estimate
rification of Response (if Necessary)			
gnature and Submission			

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

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In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Second Sight Medical Products Inc	/s/ Scott Dunbar	Scott Dunbar	Acting Chief Execuite Officer	2021-04-06