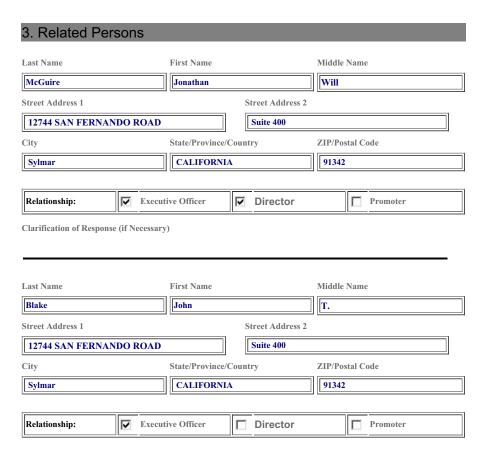


UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.

OMB APPROVAL
OMB Number: 3235-0076
Expires: August 31, 2015
Estimated Average burden hours per response: 4.0

1. Issuer's Identity			
CIK (Filer ID Number)	Previous Name(s)	▼ 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]		© Business Trust
Year of Incorporation/Organization	on.		C Other
Over Five Years Ago			
C Within Last Five Years (Specify Year)			
C Yet to Be Formed			





Last Name	First Name		Middle Name	
Williams	Gregg			
Street Address 1	Street Address 2		<u>.</u>	
12744 SAN FERNANDO ROAD		Suite 400		1
City	State/Province/Country		ZIP/Postal Code	
Sylmar	CALIFORNIA		91342	_
Symm	C.ILLI GIL II		[51012	_
Relationship: Execut	ive Officer	Director	Promoter	
Clarification of Response (if Necessary	7)			
Last Name	First Name		Middle Name	
Link	Bill			
Street Address 1		Street Address 2	-	
12744 SAN FERNANDO ROAD		Suite 400		
City	State/Province/C	Country	ZIP/Postal Code	_
Sylmar	CALIFORNIA	1	91342	$\overline{}$
Relationship: Execut	ive Officer	Director	Promoter	
Clarification of Response (if Necessary	7)			
Last Name	First Name		Middle Name	•
Last Name Mendelsohn		Stroot Address 2	Middle Name	-
Last Name Mendelsohn Street Address 1	First Name	Street Address 2	Middle Name	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD	First Name	Suite 400]
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City	First Name Aaron State/Province/O	Suite 400	ZIP/Postal Code]
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD	First Name	Suite 400]
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar	First Name Aaron State/Province/O	Suite 400	ZIP/Postal Code	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar	First Name Aaron State/Province/C CALIFORNIA	Suite 400	ZIP/Postal Code	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Relationship: Execut	First Name Aaron State/Province/C CALIFORNIA	Suite 400	ZIP/Postal Code	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Execut Clarification of Response (if Necessary Last Name	First Name Aaron	Suite 400	ZIP/Postal Code 91342 Promoter	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Execute Clarification of Response (if Necessary Last Name Pfeffer	First Name Aaron	Suite 400 Country Director	ZIP/Postal Code 91342 Promoter	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Execute	First Name State/Province/C CALIFORNIA ive Officer First Name Matthew	Suite 400 Country Director Street Address 2 Suite 400	ZIP/Postal Code 91342 Promoter]
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Execute Clarification of Response (if Necessary Last Name Pfeffer Street Address 1 12744 SAN FERNANDO ROAD City	First Name State/Province/C CALIFORNIA ive Officer // First Name Matthew	Suite 400 Country Director Street Address 2 Suite 400 Country	ZIP/Postal Code Promoter Middle Name ZIP/Postal Code]
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Execute	First Name State/Province/C CALIFORNIA ive Officer First Name Matthew	Suite 400 Country Director Street Address 2 Suite 400 Country	ZIP/Postal Code 91342 Promoter Middle Name	
Last Name Mendelsohn Street Address 1 12744 SAN FERNANDO ROAD City Sylmar Execute Clarification of Response (if Necessary Last Name Pfeffer Street Address 1 12744 SAN FERNANDO ROAD City Sylmar	First Name State/Province/C CALIFORNIA ive Officer // First Name Matthew	Suite 400 Country Director Street Address 2 Suite 400 Country	ZIP/Postal Code Promoter Middle Name ZIP/Postal Code	

4. Industry Group

C Agriculture	Health Care	C Retailing
Banking & Financial Services	Biotechnology	C Restaurants
C Commercial Banking	C Health Insurance	
C Insurance	C Hospitals & Physicians	Technology
C Investing	C Pharmaceuticals	Computers
C Investment Banking	Other Health Care	C Telecommunications
C Pooled Investment Fund		Other Technology
Other Banking & Financial Services		Travel
C Business Services	Manufacturing	C Airlines & Airports
	Real Estate	C Lodging & Conventions
Energy C Coal Mining	C Commercial	C Tourism & Travel Services
C Electric Utilities	Construction	Other Travel
C Energy Conservation	C REITS & Finance C Residential	O Other
C Environmental Services	C Other Real Estate	
Oil & Gas Other Energy		
Couler Energy		
5. Issuer Size		
Revenue Range	Aggregate Net Asset	Value Range
C No Revenues	C No Aggregat	te Net Asset Value
C \$1 - \$1,000,000	C \$1 - \$5,000,0	000
C \$1,000,001 - \$5,000,000	C \$5,000,001 -	\$25,000,000
\$5,000,001 - \$25,000,000	C \$25,000,001	- \$50,000,000
C \$25,000,001 - \$100,000,000	C \$50,000,001	- \$100,000,000
Over \$100,000,000	Over \$100,0	00,000
C Decline to Disclose	C Decline to D	isclose
C Not Applicable	C Not Applica	ble
6. Federal Exemption(s) a	and Evaluation(a) Claim	mad (aslast all that
apply)	and Exclusion(s) Clair	neu (select all that
D 1 5040 (4) (+ (b) (b)		
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 Se	ction 3(c)
7. Type of Filing		
	2018-05-03	First Sale Yet to Occur
New Notice Date of First Sale	2018-05-03	First Sale Yet to Occur
Amendment		
8. Duration of Offering		
o. Daration of Officining	2	
Does the Issuer intend this offering to last n	ore than one year?	C Yes © No
9. Type(s) of Securities O	ffered (select all that	apply)
- Pooled Investment Fund -	·	~PF.)/
Interests	Equity	
Tenant-in-Common Securities	Debt	

☐ Mineral Property Securities ☐ Option, Warrant or Other Right to Acquire Another Security
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 transaction, such as a merger, acquisition or exchange offer? Yes No
Clarification of Response (if Necessary)
11. Minimum Investment
Minimum investment accepted from any outside investor USD
12. Sales Compensation
Recipient CRD Number None
(Associated) Broker or Dealer None Number None Number
Street Address 1 Street Address 2
City State/Province/Country ZIP/Postal Code
State(s) of Solicitation All States
13. Offering and Sales Amounts
Total Offering Amount \$ 10000000 USD ☐ Indefinite
Total Amount Sold \$ 10000000 USD
Total Remaining to be \$ 0 USD ☐ Indefinite
Clarification of Response (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
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 \$ 0 USD Estimate

Finders' Fees \$ 0 USD Estimate
Clarification of Response (if Necessary)
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. S USD Estimate
Clarification of Response (if Necessary)

Signature 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

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/ John T. Blake	John T. Blake	Chief Financial Officer	2018-05-07