FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPR | OVAL |
|---------------------|-----------|
| OMB Number: | 3235-0287 |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

| e Responses) | | | | | | | | | | | | | | | | | |
|--|---|--|---|--|---|---|--|--|--|-----------------------------|--|--|---|---|-----------------------------|-----------------------------|---|
| Name and Address of Reporting Person *- McGuire Jonathan Will | | | | 2. Issuer Name and Ticker or Trading Symbol SECOND SIGHT MEDICAL PRODUCTS INC [EYES] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ Officer (give title below) Other (specify below) | | | | | |
|) N FERNAI | (First) NDO ROAD, SU | | | | | ransact | ion (M | Ionth/Da | ay/Ye | ar) | | | | Chief Ex | xecutive Office | er | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| , CA 91342 | (State) | (Zip) | | | | Tabl | a I – N | on-Dori | ivativ | a Sacuritia | s Acquir | od Di | enosad of | or Ronofie | pially Owned | | |
| 1.Title of Security 2. Transactio (Instr. 3) Date | | | ar) any | | 3. Transaction Code (Instr. 8) | | | 4. Securities Acquired | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | | neficially 6 | 6. Ownership Form: | Beneficial | |
| | | | | | | de | V A | moun | (A) or (D) | | Instr. 3 and 4) | | c (| r Indirect | Ownership (Instr. 4) | | |
| Stock | | 08/19/2019 | | | | N | 1 | | | 5 A \$ | 0 | 146,6 | 6,672 | | |) | |
| Stock | | 08/20/2019 | | | | S | S | | | D \$ | | 5 142,770 | | | I |) | |
| | | Table II | - Deriva | ative | Secur | ities Ac | c | urrentl | ly val | lid OMB co | ontrol n | umbe | | s the form | ı displays a | | |
| | | | (e.g., p | | calls, v | varrant | s, opti | ions, cor | nverti | ible securit | ies) | | | | 1 | | _ |
| Derivative Conversion Date Executity Or Exercise (Month/Day/Year) an | Execution Date, if any | Transaction of Deri Code Securit (Instr. 8) Acquir or Disp of (D) | | ivative ties red (A) posed 3, 4, | Expira | ation Da | Date | | of Un Secur | derlyir ities | ng | Derivative Security | Derivative Securities Beneficially Owned Following Reported Transaction(s | Ownersh Form of Derivativ Security: Direct (I or Indirect) | Ownersh (Instr. 4) | | |
| | | | Code | V | (A) | (D) | Date Exerc | eisable | | | Title | | Amount or Number of Shares | | (IIISII. 4) | (Instr. 4 |) |
| \$ 0 | 08/19/2019 | | M | | | | 08/1 | 7/2016 | 5(3) | 08/17/201 | 91 | mon | 11,875 | \$ 0 | 0 | D | |
| | Address of Ronathan W N FERNAL , CA 91342 Curity Stock Stock 2. Conversion or Exercise Price of Derivative Security | Address of Reporting Person Flonathan Will (First) N FERNANDO ROAD, SU (Street) , CA 91342 (State) curity Stock Stock Price of Derivative Security Address of Reporting Person Floration (Month/Day/Year) | Address of Reporting Person* Jonathan Will O (First) (Middle) N FERNANDO ROAD, SUITE 400 (Street) , CA 91342 O (State) (Zip) curity 2. Transaction Date (Month/Day/Year) Stock 08/19/2019 Stock 08/20/2019 eport on a separate line for each class of securities be Table II 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) | Address of Reporting Person* Jonathan Will On (First) (Middle) N FERNANDO ROAD, SUITE 400 (Street) Curity Curity Curity 2. Transaction Date (Month/Day/Year) Stock O8/19/2019 Stock O8/20/2019 Peport on a separate line for each class of securities beneficially Conversion or Exercise Price of Derivative Security 2. Transaction Date (Month/Day/Year) A. Derivative Security Table II - Derivative Security A. Transaction Date (Month/Day/Year) (Month/Day/Year) A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) Code Code Code Code Code Code Code Code | Address of Reporting Person* Jonathan Will SECOND [EYES] N FERNANDO ROAD, SUITE 400 (Street) Curity Curity 2. Transaction Date (Month/Day/Year) Stock 08/19/2019 Stock 08/19/2019 Stock 08/20/2019 Table II - Derivative (e.g., puts, any (Month/Day/Year) Conversion of Exercise Price of Derivative Security Security 2. Issuer N SECOND (Middle) 3. Date of Exercise (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Date of Execution any (Month/Day/Year) Stock 08/19/2019 Table II - Derivative (e.g., puts, any (Month/Day/Year) (Month/Day/Year) Code (Instr. 8) | Address of Reporting Person * 2. Issuer Name and SECOND SIGH [EYES] | Address of Reporting Person Donathan Will Conathan Will Content | Address of Reporting Person Donathan Will Code Code | Address of Reporting Person* Jonathan Will 2. Issuer Name and Ticker or Trading SSECOND SIGHT MEDICAL PR [EYES] 3. Date of Earliest Transaction (Month/D 08/19/2019 4. If Amendment, Date Original Filed(Month/Day/Year) Code (Month/Day/Year) Stock 2. Transaction Date (Month/Day/Year) Code (Month/Day/Year) Stock 08/19/2019 Amount of Date (Month/Day/Year) Stock 08/20/2019 Amount of Date (E.g., puts, calls, warrants, options, control of Code (Instr. 8) Code (Month/Day/Year) Table II - Derivative Securities Acquired, Dispate (E.g., puts, calls, warrants, options, control of Date (Month/Day/Year) Code (Instr. 8) Code (Month/Day/Year) Amount of Date (E.g., puts, calls, warrants, options, control of Derivative Securities Securitie | Address of Reporting Person | Address of Reporting Person Formathan Will SECOND SIGHT MEDICAL PRODUCTS INCE EYES SECOND SIGHT MEDICAL PRODUCTS INCE EYES S. Date of Earliest Transaction (Month/Day/Year) S. Date of Earliest Transaction (Instr. 8) S. Date of Code of (D) (Instr. 8) S. Date of Earliest Transaction | 2. Issuer Name and Ticker or Trading Symbol SECOND SIGHT MEDICAL PRODUCTS INC [EYES] (Street) (Street | Second SIGHT MEDICAL PRODUCTS INC SECOND SIGHT MEDICAL PRODUCTS INC EYES SECOND SIGHT MEDICAL PRODUCTS INC SECOND SIGN SIGN SIGN SIGN SIGN SIGN SIGN SIGN | Address of Reporting Person Conathan Will SECOND SIGHT MEDICAL PRODUCTS INC EYES SECOND SIGHT MEDICAL PRODUCTS INC EYES Securities Acquired, Disposed of (Month/Day/Year) Code V Amount (A) or Code V Amount (B) Code Code | Address of Reporting Person | Address of Reporting Person | Address of Reporting Person Conathan Will |

| | | Relationships | | |
|---|----------|---------------|-------------------------|-------|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other |
| McGuire Jonathan Will 12744 SAN FERNANDO ROAD SUITE 400 SYLMAR, CA 91342 | X | | Chief Executive Officer | |

Signatures

| /s/ John T. Blake, Attorney-in-fact | 08/20/2019 |
|-------------------------------------|------------|
| Signature of Reporting Person | Date |

Explanation of Responses:

* 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).
- (1) 11,875 shares of common stock acquired upon final vesting and release of common stock from restricted stock units (RSUs).
- (2) 3,902 shares were sold to satisfy the tax withholding obligations on final vesting and release of common stock from RSUs.
- (3) RSUs were granted on 8/17/2015 and vest over a 4 year term, with 25% of the total number of units vesting on the first anniversary of the grant date and thereafter vesting in 12 equal quarterly installments of 6.25% of the total number of units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.