F	ORM	5
-	Check this box if no	longer

Check this box if no longer
subject to Section 16. Form 4
or Form 5 obligations may
continue. See Instruction 1(b).
Form 3 Holdings Reported

Form 4 Transactions

Reported

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

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SEC 2270 (9-02)

ANNUAL 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

1. Name and Address of Reporting Person [*] Mendelsohn Aaron			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) 			
(Last) 13170 TELFAIR	(First) AVENUE		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021								
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line) _X_ Form Filed by One Reporting Person				
SYLMAR, CA 91342							Form Filed by More than One Reporting Person				
(City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					Owned			
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securi (A) or Di (D) (Instr. 3,	isposed	l of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Amount	(D)	Price		(Instr. 4)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

	(e.g., puts, calls, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Title	e and	8. Price of	9. Number	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	ber and Expiration Date		Amou	nt of	Derivative	of	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of	(Month/Day/Year)		Under	lying	Security	Derivative	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriva	ative			Securi	ties	(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Securi	ities			(Instr.	3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqui	red			4)			Owned at	Direct (D)	
					(A) or								or Indirect	
					Dispo								(I)	
					of (D)							Fiscal Year	(Instr. 4)	
					(Instr.	· · ·						(Instr. 4)		
					4, and	5)								
										Amount				
							Date	Expiration		or				
							Exercisable		Title 1	Number				
							Excleisable	Dute		of				
					(A)	(D)			:	Shares				

Reporting Owners

Bonorting Owner Name /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Mendelsohn Aaron 13170 TELFAIR AVENUE SYLMAR, CA 91342	Х						

Signatures

/s/ Aaron Mendelsohn	04/28/2022
^{**} 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) Mr. Mendelsohn gifted these shares to Mendelsohn Investment Services LLC, an entity owned by his two adult children. Mr. Mendelsohn has neither an interest in or any voting power in this entity.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.