FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

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

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

| Name and Address of Reporting Person* Mendelsohn Adam | | | | | | 2. Issuer Name and Ticker or Trading Symbol Vivani Medical, Inc. [VANI] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|---|--|--|-------------|-------|---|--|--|-------|--|------|--------------------|---|---|-------------------------------------|---|--|---|--|---|
| (Last) (First) (Middle) C/O 5858 HORTON ST, SUITE 280 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/08/2023 | | | | | | | | | X | Officer (g below) | | | | |
| (Street) EMERYVILLI (City) | E CA (State) | 94 (Zi | 608 p) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Та | ble I - Noı | n-Der | ivativ | e Se | curitie | s Acq | uired, | Disp | osed of, | , or E | Benefi | cially Ow | /ned | | | | |
| Date | | | | | h/Day/Year) Exec | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | Amount (A | | Price | (Instr. 3 and 4) | | | | (111501.4) |
| Common Stock 02/0 | | | | | 08/2023 | | G ⁽¹⁾ | | 17,000 D | | \$0 | 3,605,015 | | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Exercise (Month/Day/Year) if any Code (Instead of Code (I | | | | 5. Num Derivat Securit Acquir or Disp (D) (Ins and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amour Securities Underly Derivative Securit (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | (0) | | |

Explanation of Responses:

1. Represents shares of common stock gifted to a non-family member.

/s/ Adam Mendelsohn

02/10/2023

** Signature of Reporting Person

Date

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.