

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

1. Name and Address of Reporting Person* MILLER THOMAS B <hr/> (Last) (First) (Middle) 12744 SAN FERNANDO ROAD SUITE 400 <hr/> (Street) SYLMAR CA 91342 <hr/> (City) (State) (Zip)			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) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) Chief Financial Officer		
			3. Date of Earliest Transaction (Month/Day/Year) 01/19/2018			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person		
			4. If Amendment, Date of Original Filed (Month/Day/Year)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock								78,354	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Non-qualified Stock Option (right to buy)	\$1.83	01/19/2018		A		150,000		01/19/2019 ⁽¹⁾	01/19/2028	Common Stock	150,000	(4)	150,000	D	
Warrant to Purchase Common Stock	\$1.47							03/14/2017	03/14/2022	Common Stock	86,135		86,135	D	
Non-qualified Stock Option (right to buy)	\$1.97							01/03/2018 ⁽²⁾	01/03/2027	Common Stock	181,980		181,980	D	
Non-qualified Stock Option (right to buy)	\$4.1							01/21/2017 ⁽²⁾	01/21/2026	Common Stock	38,225		38,225	D	
Non-qualified Stock Option (right to buy)	\$7							08/01/2015 ⁽³⁾	08/01/2024	Common Stock	175,000		175,000	D	
Non-qualified Stock Option (right to buy)	\$13.09							03/25/2016 ⁽³⁾	03/25/2025	Common Stock	12,907		12,907	D	

Explanation of Responses:

1. Options 100% vest on the date exercisable (one year).
2. Options vest over a four year term of which one-fourth vests on the Date Exercisable, with the remaining options vesting quarterly over three years thereafter.
3. Options vest in 4 yearly increments starting with the Date Exercisable.
4. Not Applicable

/s/ Thomas B. Miller 01/23/2018

** 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.