FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

1. Name and Address of Reporting Person

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	'ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
houre per reenonce	. 0.5							

5. Relationship of Reporting Person(s) to Issuer

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

2. Issuer Name **and** Ticker or Trading Symbol

Manko Douglas John					LIVANOVA PLC [LIVN]										"	JIICUN	Directo	r		10% Ov		
(Last) 20 EASTE		3. Date of Earliest Transaction (Month/Day/Year) 08/15/2018										X	below)	(give title	ıntinş	Other (s below) g Officer	specify					
(Street) LONDON (City)	X0		/2 6I	LG	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Indiv ne) X	'					
(Oity)	(010			Non-Deriv	ative	Seci	uriti	es A	cquii	ed,	Dis	sposed o	of, or	Ben	eficia	ally (Owned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Y	n	2A. Dee Executi if any			3. Transaction Code (Instr. 8)		4. Securities Acqu Disposed Of (D) (I		Acquire	cquired (A) or			5. Amount of Securities Beneficially Owned Following		Form (D) o	n: Direct r Indirect istr. 4)	. Nature of ndirect Beneficial Ownership		
								Ì	Code	v	Aı	mount	(A) or (D)	Price		Report Transa (Instr. 3		tion(s)			(Instr. 4)	
Ordinary Shares Ordinary Shares				08/15/2018 08/15/2018					M			4,300	A		\$61		5,728		D			
									F ⁽¹⁾			2,160	D	\$121.4		18	3,568		D			
Ordinary Shares			08/15/20	5/2018				F ⁽²⁾			522	D \$12		\$121.4	.48 3		,046		D			
Ordinary Shares 08/15/			08/15/20:	18				S			2,058	D	\$1	21.61	16 ⁽³⁾	988			D			
		Та	ble	II - Deriva (e.g., p								osed of converti					wned					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed cution Date, Y nth/Day/Year)		action (Instr.	of Deri Sec Acq (A) Disp	posed D) str. 3, 4	Exp (Mo	Pate Expiration	n Da		Amou Secur Unde Deriv	7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4		D Si (li	B. Price of Derivative Gecurity Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	Code V		(D)	Dat Exe	e ercisab	ole	Expiration Date	Title		Amour or Number of Shares	er						
Stock Appreciation	\$61	08/15/2018			M			4,30	$\begin{bmatrix} \\ \end{bmatrix}$	(4)		(4)	Ordin	ary	4,30	, -	\$0	19.46	2	D		

Explanation of Responses:

- 1. The referenced shares were withheld from distribution at the request of reporting person to pay option exercise price.
- 2. The referenced shares were withheld from distribution at the request of reporting person to satisfy tax liability.
- 3. Represents weighted average selling price. Securities sold through 3 separate sales on the transaction date at prices ranging from \$121.4769 to \$121.6483. The reporting person hereby undertakes to provide upon request to the SEC, the issuer or any stockholder of the issuer, the full information regarding the number of shares and prices at which the transaction was effected.
- 4. Reporting person was granted an award of stock appreciation rights ("SARs"), subject to the terms and conditions of the LivaNova PLC 2015 Incentive Award Plan (the "Plan") and the SAR Agreement, the SARs shall vest in equal installments of 25% on each of the four anniversaries of the grant date, August 5, 2016.

Remarks:

Douglas J. Manko

08/17/2018

** 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.