### 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
notruction 1/h)

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Skeffington Keyna Pidcock</u>							2. Issuer Name <b>and</b> Ticker or Trading Symbol LivaNova PLC [ LIVN ]									of Reporting Person(s) to Issuer cable) or 10% Owner		vner	
(Last) 20 EAST	) (First) (Middle) ASTBOURNE TERRACE					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2019									X Officer (give title Other (specify below)  General Counsel				specify
(Street) LONDO		-	W2 6LG (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						r) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefic Owned	es ially Following	6. Owner Form: D (D) or Ir (I) (Insti	Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or F	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Ordinary Shares 03/15/2						)19		M		460		A	\$0 <sup>(1)</sup>	1	1,068		)		
Ordinary Shares 03/15/2					/2019	2019					216	2) ]	)	\$95.8	84 8	352	Γ	)	
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. Deem Execution if any (Month/Da	Date,	1. Fransaction Code (Instr. 3)		n of E		6. Date E Expiratio (Month/D	n Date		Amount Securiti Underly Derivati	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	vnership orm: rect (D) Indirect	Beneficial Ownership (Instr. 4)
					Code	v	(A) (D)		Date Exercisal		xpiration ate	Title	or Nur of	ount nber ires					
Restricted Stock Units	(3)	03/15/2019			M			460	(4)		(4)	Ordinary Shares	4	60	\$0	9,694		D	

## **Explanation of Responses:**

- 1. Reporting person had vested restricted stock units (RSUs) settled in ordinary shares (Ordinary Shares) of LivaNova PLC (the Company), GBP 1.00 par value.
- 2. The referenced shares were withheld from distribution at the request of reporting person to satisfy tax liability.
- 3. Each RSU represents a contingent right to receive one Ordinary Share of the Company, GBP 1.00 par value, in accordance with the terms of the LivaNova PLC 2015 Incentive Award Plan (the Plan) and the
- 4. Reporting person was granted RSUs subject to a four-year vesting schedule, vesting 25% on each of the first four anniversaries of March 15, 2018, subject to continued service during the vesting period.

# Remarks:

/s/ Keyna Pidcock Skeffington 03/19/2019

\*\* 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.