FORM 4

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

OMB APPROVAL
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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 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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | | | | | | |
|--|---|------------|---|--|------|--|--|---------------|----------------------|---|---------------|--|---|--|------|---|---|---|-----------------------------|
| 1. Name and Address of Reporting Person * TURNER BRIAN V | | | | 2. Issuer Name and Ticker or Trading Symbol MICROVISION, INC. [MVIS] | | | | | | | : | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director | | | | | | | |
| (Last) (First) (Middle) 6244 185TH AVENUE NE, SUITE 100 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/25/2021 | | | | | | | | Officer (give title below) Other (specify below) Director | | | | | | | |
| (Street) REDMOND, WA 98052 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | - | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person | | | | | | | |
| (City) (State) (Zin) | | | | | | rivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | |
| (Instr. 3) Date | | | 2. Transaction Date (Month/Day/Year | Execut any | | | | (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | f(D) | O) Owned Following Reported Transaction(s) | | • | Form: | of I Ben | 7. Nature of Indirect Beneficial | |
| | | | | (Mon | in/D | ay/ Y ear | | ode | V A | mount | (A) or (D) | Price | (Instr. 3 and 4) | | | | Direct (D) Owr or Indirect (Inst (I) (Instr. 4) | | rnership str. 4) |
| Common Stock 05/25/2021 | | | 05/25/2021 | | | N | M | 1 | ,875 | A | \$ 9.20 | 245,752 | | | D | | | | |
| Common Stock 05/25/2021 | | | 05/25/2021 | | | N | M | 1 | 5,000 | A | \$ 3.08 | 260,752 | | | D | | | | |
| | | | Table II | | | | | a | curre | ntly va | or Benef | contro | ol num | ber. | | form displ | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | | 4. 5. Transaction of Code Se (Instr. 8) Ac or of (In | | 5. Nur of Der Securi Acqui or Dis of (D) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, | | ite Exer ration D | convertible securit tercisable and a Date ay/Year) | | 7. Title and Ar of Underlying Securities (Instr. 3 and 4) | | ŗ | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s | Owne Form Derive Securi Direct or Ind | rship of ntive ty: (D) irect | Ownersh (Instr. 4) D) |
| | | | | Code | V | (A) | (D) | Date Exerc | cisable | Expi Date | ration | Title | o N | Amount or Number of Shares | | (Instr. 4) | (Instr. | 4) | |
| Option (Right to Buy) | \$ 9.2 | 05/25/2021 | | M | | 1 | 1,875 | 06/0 | 06/201 | 2 06/0 | 09/2021 | Comi | | 1,875 | \$ 0 | 0 | Б | | |
| Option (Right to Buy) | \$ 3.08 | 05/25/2021 | | M | | 1 | 5,000 | 06/0 | 07/201 | 3 06/0 | 07/2022 | Com | | 15,000 | \$ 0 | 0 | Б | , | |

Reporting Owners

| | Relationships | | | | | |
|--|---------------|--------------|----------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| TURNER BRIAN V 6244 185TH AVENUE NE, SUITE 100 REDMOND, WA 98052 | X | | Director | | | |

Signatures

| /s/Stephen P. Holt For: Brian V. Turner by Power of Attorney | 05/27/2021 |
|--|------------|
| **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).

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