Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEF	ICIAL	OWNERS	HIP

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 a	<u>H</u>	2. Issuer Name and Ticker or Trading Symbol HELIUS MEDICAL TECHNOLOGIES, INC [HSDT]							Relationship eck all applic Directo	cable)	g Pers	son(s) to Issi 10% Ow Other (s	/ner				
	MEDICAL	TECHNOLOG		05	3. Date of Earliest Transaction (Month/Day/Year) 05/15/2018							X Officer (give title below) CFO and COO			below)		
642 NEWTOWN YARDLEY ROAD, SUITE 100 (Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
NEWTOWN PA 18940		18940	_								X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)														
		Tab	le I - Non-De	erivativ	e Se	curities	s Ac	quired, Di	sposed c	f, or Be	neficial	y Owned					
Date				Transaction te onth/Day/Y	Execution Date,		Code (Instr. 5)			ed (A) or tr. 3, 4 and	Beneficia Owned F	s ally following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
				Code V			Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ction(s)			(Instr. 4)			
		٦	Fable II - Der (e.g					uired, Dis s, options,				Owned	,		· ·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) Dr Exercise (Month/Day/Year) Derivative Execution Date, if any (Month/Day/Year)		Code	ransaction of Code (Instr. Derivative		ve es d ed nstr.	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)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to	\$10.99 ⁽¹⁾	05/15/2018		A		80,000		(2)	05/15/2028	Class A Common Stock	80,000	\$0.00	80,000	0	D		

Explanation of Responses:

- $1.\ Translated into \ US \ dollars \ from \ Canadian \ dollars \ based \ on \ buying \ rate \ from \ Bank \ of \ Canada. \ USD \$1.0000 = CAD \$1.2876 \ on \ May \ 15, \ 2018; \ based \ on \ exercise \ price \ of \ CAD \$1.415.$
- 2. Grant to the Reporting Person of a stock option under the Issuer's 2016 Omnibus Incentive Plan (the "2016 Plan"). The shares vest in a series of forty-eight (48) successive equal monthly installments measured from May 15, 2018, subject to the Reporting Person's continued service through each applicable vesting date.

Remarks:

/s/ Joyce LaViscount

05/17/2018

** 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.