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	
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STATEMENT OF CHANG	GES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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

Name and Address of Reporting Person*     Sackier Jonathan				2. Issuer Name and Ticker or Trading Symbol HELIUS MEDICAL TECHNOLOGIES, INC. [ HSDT ]					(Ch	Relationship of Reporting Person(s) to Issue (Check all applicable)     Director			ner				
(Last) 642 NEV	,	irst) ARDLEY ROAI	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/16/2020						_	X Officer (greening below)  Chief Medical Officer					
SUITE 100										_							
(Street)  NEWTO	WN PA	Α	18940							Line	X Form filed by One Reporting Person						
(City)	(S	tate)	(Zip)			Form filed by More than C Person							One Repor	ing			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				2. Transac Date (Month/Da	Execution Date,		Code (Instr. 5)		ed (A) or tr. 3, 4 and	Beneficia	es Forn ally (D) o following (I) (Ir		n: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			Instr. 4)			
	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)	erivative   Conversion   Date   Execution Date,   T ecurity   or Exercise   (Month/Day/Year)   if any   C		Co	ansaction ode (Instr. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year) of Se Unde Deriv		7. Title and Amour 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)			
				Co	de V	, (	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$0.32	04/16/2020		1	A	5	50,000		(1)	04/15/2030	Class A Common Stock	50,000	\$0.00	50,000		D	

## Explanation of Responses:

## Remarks:

/s/ Jonathan Sackier

04/20/2020

\*\* Signature of Reporting Person

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.

<sup>1.</sup> Grant to the Reporting Person of a stock option under the Issuer's 2018 Omnibus Incentive Plan. The shares vest in a series of four (4) successive equal annual installments measured from April 16, 2020, subject to the Reporting Person's continued service through each applicable vesting date.