Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
-------------	------------

Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
to Section 16. Form 4 or Form 5	
obligations may continue. See	

OMB APPROVAL 3235-0287 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

Name and Address of Reporting Person*     LaViscount Joyce N						2. Issuer Name and Ticker or Trading Symbol HELIUS MEDICAL TECHNOLOGIES, INC. [ HSDT ]									all app Direc	,	ng Per	rson(s) to Is 10% O Other (	wner	1
(Last) 642 NEV SUITE 1		st) (N ARDLEY ROAI	(Middle) DLEY ROAD				arliest	Trans	action (f	Month	/Day/Year)	X	below)  CFO and CO			below)				
(Street) NEWTOWN PA 18940 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	′						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	Benefi	icially	Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution (Year) if any		ution Date,		3. Transaction Code (Instr. 8)  4. Securities A Disposed Of (I 5)					4 and Securi Benefi		ties cially I Following	Form (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or Pri	се	Transa	action(s) 3 and 4)			(11150.4)	ì
Class A Common Stock 05/29/20					2020		A		5,557(1)	A	\$0	).49 <sup>(2)</sup>	9(2) 88,316			D		ı		
		Tal									osed of, convertib				Owne	d	,			_
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	Code (		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins		9. Number derivative Securities Seneficially Owned Following Reported Transactior (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. These shares are represented by fully vested restricted stock awards (the "RSAs").
- 2. The RSAs were issued to the Reporting Person in connection with the Reporting Person's election to participate in the Company's salary reduction program, pursuant to which the Reporting Person will receive RSAs in lieu of a percentage of the Reporting Person's cash compensation

## Remarks:

/s/ Joyce LaViscount

06/01/2020

\*\* 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.