

OMB APPROVAL	
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**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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>Sackier Jonathan</u>  (Last) (First) (Middle) <u>C/O HELIUS MEDICAL TECHNOLOGIES, INC.</u> <u>SUITE 400, 41 UNIVERSITY DRIVE</u>  (Street) <u>NEWTOWN PA 18940</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>HELIUS MEDICAL TECHNOLOGIES, INC. [ HSDT ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <u>Chief Medical Officer</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>04/17/2017</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> 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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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)		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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option (Right to Buy)	\$1.63 <sup>(1)</sup>	04/17/2017		A		473,376		(2)	04/17/2027	Class A Common Stock	473,376	\$0.00	473,376	D	
Stock Option (Right to Buy)	\$1.63 <sup>(1)</sup>	04/17/2017		A		326,624		(3)	04/17/2027	Class A Common Stock	326,624	\$0.00	326,624	D	

**Explanation of Responses:**

- Translated into US dollars from Canadian dollars based on buying rate from Federal Reserve Bank. USD \$1.0000 = CAD \$1.3277 on April 17, 2017; based on exercise price of CAD \$2.16
- Grant to the Reporting Person of a stock option under the Issuer's 2014 Stock Incentive Plan. The shares vest over four years with 25% of the shares vesting on April 17, 2018 and the remaining shares vesting annually in three equal installments on April 17, 2019, 2020 and 2021, subject to the Reporting Person's continued service through each applicable vesting date.
- Grant to the Reporting Person of a stock option under the Issuer's 2016 Omnibus Incentive Plan (the "2016 Plan"). The shares vest over four years with 25% of the shares vesting on April 17, 2018 and the remaining shares vesting annually in three equal installments on April 17, 2019, 2020 and 2021, subject to the Reporting Person's continued service through each applicable vesting date.

**Remarks:**

/s/ Jonathan Sackier 04/19/2017

\*\* 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.