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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL OMB Number:

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					01 3000	ion 30(n) of the	investine	III COI	ipariy Act	01 13	740						
1. Name and Address of Reporting Person* ANDREEFF DANE						2. Issuer Name and Ticker or Trading Symbol HELIUS MEDICAL TECHNOLOGIES,							elationship of the contract of	,			
					INC. [HSDT]							'	-				
(Last) (First) (Middle)												_	Officer below)	(give title		Other (s	specity
C/O HELIUS MEDICAL TECHNOLOGIES, INC.						3. Date of Earliest Transaction (Month/Day/Year)							,			,	
·						2019											
642 NEWTOWN YARDLEY ROAD, SUITE 100					4 If Assess descript Date of Original Filed (Atanth (Day))(can)							0.15	altidation from 1	l-:+/0		(Ob l - A -	-1:1-1-
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)													X Form fi	led by One	Report	ting Perso	n
NEWTOWN PA 18940													Form filed by More than One Reporting				
												Person					
(City)	(5	state)	(Zip)														
		Tak	de I - Nor	-Deriv	ative Se	curities Ac	nuired	Die	nosed c	of o	r Rone	ficiall	v Owned				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Transa Date (Month/E				ay/Year)	2A. Deemed Execution Date if any (Month/Day/Yea	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amour Securitie Beneficia Owned F	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Ī.,		(A) or D			Reported Transact				(Instr. 4)	
						Code	V	Amount		(A) or (D)	Price		(Instr. 3 and 4)				
		-	Table II - I	Derivat	ive Sec	urities Acq	uired. I	Dispo	sed of	. or	Benef	icially	Owned				
						s, warrants											
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, Ti	ransaction ode (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr.	6. Date E Expiratio (Month/E	n Date		of Securi		ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio	Owners Form: Direct (or India (I) (Inst	Ownership	Beneficial Ownership ct (Instr. 4)
				L		3, 4 and 5)							l	(Instr. 4)	- 1		1

Explanation of Responses:

\$6.76

1. Grant to the Reporting Person of a stock option under the Issuer's 2018 Omnibus Incentive Plan. The shares vest in a series of twelve (12) successive equal monthly installments measured from March 28, 2019, subject to the Reporting Person's continued service through each applicable vesting date.

Date

Exercisable

(1)

(D)

Expiration

03/28/2029

Title

Class A

Common

Stock

Remarks:

Stock

Buy)

Option

(Right to

/s/ Joyce LaViscount, Attorneyin-Fact

Amount or Number

Shares

17,901

\$0.00

** Signature of Reporting Person Date

17,901

04/01/2019

D

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).

03/28/2019

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

Α

(A)

17,901

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.