SEC For	m 4 FORM	4	UNITED S	STATI	ES SI	ECUR	ITIE	ES AND	EXCHA	NGE C	OMMI	SSION					
Washington, D.C. 20549												OMB APPROVAL			/AL		
Section 16. Form 4 or Form 5 obligations may continue. See						NT OF CHANGES IN BENEFICIAL OWNE I pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940							CMB Number: Estimated aver hours per resp			0.5	
1. Name and Address of Reporting Person* <u>Favit-Van Pelt Antonella R.</u>					2. Issuer Name and Ticker or Trading Symbol HELIUS MEDICAL TECHNOLOGIES, INC. [HSDT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				ner	
 (Last) (First) (Middle) C/O HELIUS MEDICAL TECHNOLOGIES INC. 642 NEWTOWN YARDLEY ROAD, SUITE 100 				C.	3. Date of Earliest Transaction (Month/Day/Year) 02/16/2022							Chief Medical Officer					
(Street) NEWTOWN PA 18940					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																	
		Tab	ole I - Non-D	erivat	ive Se	curities	s Ac	quired, D	isposed (of, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ate	Execution Date,		, Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		Beneficia Owned F	s Form ally (D) c following (I) (II		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
				Code V			Amount	(A) oi (D)	Price	Price Reported Transaction (Instr. 3 and				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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	e, Trar Cod	nsaction le (Instr.	5. Number of		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)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	le V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$4.68	02/16/2022		A		30,000		(1)	02/15/2032	Common Stock	30,000	\$0.00	30,000	,	D		

Explanation of Responses:

1. Grant to the Reporting Person of a stock option under the Issuer's 2018 Omnibus Incentive Plan. The options vest in a series of twelve (12) successive equal quarterly installments on the last day of each quarter so that all of the options will be vested on the three-year anniversary of the grant date, subject to the Reporting Person's continued service through each applicable vesting period.

Remarks:

<u>/s/ Allison Northup, b</u>	<u>oy Power</u>	02/18/2022
of Attorney		02/10/2022

** 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.