The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

	OMB APPROVAL	
Washington, D.C. 20549 FORM D	OMB Number: Estimated ave burden	3235- 0076 erage
	hours per response:	4.00

1. Issuer's Identity

CIK (Filer ID Nur	nber) Previous Names	None	Entity Type
<u>0001610853</u>	0996445 B.C	C. Ltd.	X Corporation
Name of Issue			Limited Partnership
HELIUS MEDICAL TECHI INC.	NOLOGIES,		Limited Liability Company General Partnership
Jurisdiction o	f		Business Trust
Incorporation/Organ	nization		Other (Specify)
WYOMING			
Year of Incorpora	tion/Organization		
Over Five Years Ago			
X Within Last Five Years (S	Specify Year) 2014		
Yet to Be Formed			
2. Principal Place of Busines	s and Contact Information		
Name	of Issuer		
HELIUS MEDICAL TECH	NOLOGIES, INC.		
Street A	Address 1		Street Address 2
SUITE 400, 41 UNIVERSIT	TY DRIVE		
City	State/Province/Country	ZIP/PostalC	Code Phone Number of Issuer
NEWTOWN	PENNSYLVANIA	18940	215-809-2018
3. Related Persons			
Last Name	Firs	at Name	Middle Name
Deschamps	Philippe		
Street Address 1	Street	Address 2	
Suite 400, 41 University Dri	ve		
City	State/Prov	vince/Country	ZIP/PostalCode
Newtown	PENNSYLVANI	A	18940
Relationship: X Executive	Officer X Director Promot	er	
Clarification of Response (if	Necessary):		
Last Name	Firs	t Name	Middle Name
Tyler	Mitch		
Street Address 1		Address 2	
Suite 400, 41 University Dri			
City		/ince/Country	ZIP/PostalCode
Newtown	PENNSYLVANI	A	18940
Relationship: Executive C	Officer X Director Promote	Pr	

Clarification of Response (if Necessary):

Last Name	First Name Edward	M.	Middle Name
Straw Street Address 1	Edward Street Address 2	1 V1.	
Suite 400, 41 University Drive	Salet indition 2		
City	State/Province/Country		ZIP/PostalCode
Newtown	PENNSYLVANIA	18940	
Relationship: Executive Officer	X Director Promoter		
Clarification of Response (if Neces	sary):		
Last Name	First Name		Middle Name
LaViscount	Joyce		
Street Address 1	Street Address 2		
Suite 400, 41 University Drive			
City	State/Province/Country	10040	ZIP/PostalCode
Newtown	PENNSYLVANIA	18940	
Relationship: X Executive Officer	A DIRECTOR PROHIOUER		
Clarification of Response (if Neces	sary):		
Last Name	First Name		Middle Name
Sackier	Jonathan		
Street Address 1	Street Address 2		
Suite 400, 41 University Drive			
City	State/Province/Country	10040	ZIP/PostalCode
Newtown Relationship: X Executive Officer	PENNSYLVANIA	18940	
Clarification of Response (if Neces	sary):		
Last Name Chiu	First Name Savio		Middle Name
			Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive	Savio		Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City	Savio Street Address 2 State/Province/Country		Middle Name ZIP/PostalCode
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown	Savio Street Address 2 State/Province/Country PENNSYLVANIA	18940	
Chiu Street Address 1 Suite 400, 41 University Drive City	Savio Street Address 2 State/Province/Country PENNSYLVANIA	18940	
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter	18940	
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name	18940	
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name Yuri	18940	ZIP/PostalCode
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Street Address 1	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name	18940	ZIP/PostalCode
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Street Address 1 Suite 400, 41 University Drive	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name Yuri Street Address 2	18940	ZIP/PostalCode Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Street Address 1	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name Yuri	18940	ZIP/PostalCode
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Clarification of Respons	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name Yuri Street Address 2 State/Province/Country		ZIP/PostalCode Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Clarification of Respons	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name Yuri First Name Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter		ZIP/PostalCode Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Last Name Danilov Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary): First Name Yuri First Name Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter		ZIP/PostalCode Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess 4. Industry Group	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter ary): First Name Yuri Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary):	18940	ZIP/PostalCode Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess 4. Industry Group Agriculture	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter ary): First Name Yuri Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter ary): Health Care		ZIP/PostalCode Middle Name
Chiu Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess Last Name Danilov Street Address 1 Suite 400, 41 University Drive City Newtown Relationship: Executive Officer Clarification of Response (if Necess 4. Industry Group	Savio Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter ary): First Name Yuri Street Address 2 State/Province/Country PENNSYLVANIA X Director Promoter sary):	18940	ZIP/PostalCode Middle Name

Insurance Investing **Investment Banking** Pooled Investment Fund Is the issuer registered as an investment company under the Investment Compa Act of 1940? Yes Other Banking & Fina **Business Services** Energy Coal Mining **Electric Utilities Energy Conservation Environmental Service** Oil & Gas

Other Energy

5. Issuer Size

ny under	Iteli Lotate	ЛШ
any	Commercial	Lodg
No	Construction	Tour
ancial Services	REITS & Finance	Othe
	Residential	Other
	Other Real Estate	
es		

Hospitals & Physicians

Pharmaceuticals

X Other Health Care

Manufacturing

Real Estate

Revenue Range OR **Aggregate Net Asset Value Range** No Revenues No Aggregate Net Asset Value \$1 - \$1,000,000 \$1 - \$5,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$5.000.001 -\$25,000,001 - \$50,000,000 \$25,000,000 \$25,000,001 -\$50,000,001 - \$100,000,000 \$100,000,000 Over \$100,000,000 Over \$100,000,000 X Decline to Disclose Decline to Disclose Not Applicable Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Investment Company Act Sect		
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)
Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii)	Section 3(c)(2)	Section 3(c)(10)
Rule 504 (b)(1)(iii)	Section 3(c)(3)	Section 3(c)(11)
Rule 505	Section 3(c)(4)	Section 3(c)(12)
X Rule 506(b) Rule 506(c)	Section 3(c)(5)	Section 3(c)(13)
Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)
	Section 3(c)(7)	

7. Type of Filing

- X New Notice Date of First Sale 2015-10-09 First Sale Yet to Occur Amendment
- 8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

Computers Telecommunications Other Technology Travel Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Travel

 X Equity X Debt X Option, Warrant or Other Right to Acquire Another Security X Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security 	Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Other (describe)
10. Business Combination Transaction	
Is this offering being made in connection with a business combinat a merger, acquisition or exchange offer?	ion transaction, such as Yes X No
Clarification of Response (if Necessary):	
11. Minimum Investment	
Minimum investment accepted from any outside investor \$0 USD	
12. Sales Compensation	
Recipient Recipi	ent CRD Number X None
(Associated) Broker or Dealer X None (Assoc	iated) Broker or Dealer CRD Number X None
Street Address 1	Street Address 2
City State/P	rovince/Country ZIP/Postal Code
State(s) of Solicitation (select all that apply) Check "All States" or check individual States Fore	gn/non-US
13. Offering and Sales Amounts	
Total Offering Amount \$12,250,000 USD or Indefinite	
Total Amount Sold\$2,000,000 USD	
Total Remaining to be Sold \$10,250,000 USD or Indefinite	
Clarification of Response (if Necessary):	

The \$7.0 million funding is convertible into units consisting of one common share and one half of one common share purchase warrant. The conversion rate and warrant exercise price are based on the current market price of the company's common stock.

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

1

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
HELIUS MEDICAL TECHNOLOGIES, INC.	/s/ Philippe Deschamps	Philippe Deschamps	Chief Executive Officer	2015-10-26

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.