FORM 4

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

Washington, D.C. 20549

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**OMB APPROVAL** 

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(c). Se	ee Instruction 1	0.																	
Name and Address of Reporting Person*  Cohen Jon R				2. Issuer Name <b>and</b> Ticker or Trading Symbol Talkspace, Inc. [ TALK ]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Collect John IX													Ι,	✓ Direct Office			10% O		
(Last) (First) (Middle)				3. Da	te of E	arliest	t Transa	action (N	/lonth/	(Day/Year)			1	Office below	er (give title /)		Other (: below)	specily	
C/O TALKSPACE, INC.					3. Date of Earliest Transaction (Month/Day/Year) 09/11/2024 Chief Executive Officer														
2578 BROADWAY #607																			
				4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street)			0005											Line		filed by On	e Ren	ortina Pers	on
NEW YO	ORK NY	<i>(</i> 1	0025											Ι,		filed by Mo		•	
(City)	(St	ate) (Ž	Zip)												Perso	on			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Ac Disposed Of (D) 5)					Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) (D)	(A) or (D)		Transa	Transaction(s) (Instr. 3 and 4)			(instr. 4)
Common Stock 09/1				09/11/	2024			F <sup>(1)</sup>		39,884	,884 D		\$2	2,304,901			D		
Common Stock 09/1				09/11/	2024			F <sup>(1)</sup>		31,907	07 D		\$2	2,272,994			D		
Common Stock 09/11/				09/11/	/2024				F <sup>(1)</sup>		4,112	D		\$2	2 2,268,882		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
4 Title of	2	2 Transaction				,,,,	_			-						O Number		40	44 Neture
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disport of (D	vative urities uired or osed ) r. 3, 4	6. Date Expirati (Month/	on Da	te American Security Und Derivative Security Sec		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

1. Represents the number of shares withheld by the issuer to satisfy applicable tax withholding obligations in connection with the vesting of restricted stock units ("RSUs") previously reported.

By: /s/ John Reilly, Attorneyin-fact for Jon R Cohen

09/13/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.