

FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Primary Business Name: GSI (BERMUDA) LTD.

CRD Number: 136017

Annual Amendment - Item 1 Identifying Information

Rev. 10/2012

WARNING: Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 4.

Item 1 Identifying Information

Responses to this Item tell us who you are, where you are doing business, and how we can contact you.

A. Your full legal name (if you are a sole proprietor, your last, first, and middle names):

GSI (BERMUDA) LTD.

B. Name under which you primarily conduct your advisory business, if different from Item 1.A.:

GSI (BERMUDA) LTD.

List on Section 1.B. of Schedule D any additional names under which you conduct your advisory business.

C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.), enter the new name and specify whether the name change is of

☐ your legal name or ☐ your primary business name:

D. (1) If you are registered with the SEC as an investment adviser, your SEC file number: **801-64484**

(2) If you report to the SEC as an *exempt reporting adviser*, your SEC file number:

E. If you have a number ("CRD Number") assigned by the *FINRA's CRD* system or by the IARD system, your CRD number: **136017**

If your firm does not have a CRD number, skip this Item 1.E. Do not provide the CRD number of one of your officers, employees, or affiliates.

F. *Principal Office and Place of Business*

(1) Address (do not use a P.O. Box):

Number and Street 1:

BERMUDIANA ARCADE

City:

HAMILTON

State:

Number and Street 2:

27 QUEEN STREET, 3RD FLOOR

Country:

BERMUDA

ZIP+4/Postal Code:

HM11

If this address is a private residence, check this box: ☐

List on Section 1.F. of Schedule D any office, other than your principal office and place of business, at which you conduct investment advisory business. If you are applying for registration, or are

registered, with one or more state securities authorities, you must list all of your offices in the state or states to which you are applying for registration or with whom you are registered. If you are applying for SEC registration, if you are registered only with the SEC, or if you are reporting to the SEC as an exempt reporting adviser, list the largest five offices in terms of numbers of employees.

(2) Days of week that you normally conduct business at your *principal office and place of business*:

☒ Monday - Friday ☐ Other:

Normal business hours at this location:

9:00AM - 5:00PM

(3) Telephone number at this location:

441-296-4527

(4) Facsimile number at this location:

441-296-4520

G. Mailing address, if different from your *principal office and place of business* address:

Number and Street 1:

C/O GSI MANAGEMENT LTD.

Number and Street 2:

909 LIPPO CENTER; TOWER II

City:

ADMIRALTY

State:

Country:

HONG KONG

ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐

H. If you are a sole proprietor, state your full residence address, if different from your *principal office and place of business* address in Item 1.F.:

Number and Street 1:

48C PARK TOWERS I

Number and Street 2:

City:

HONG KONG

State:

Country:

HONG KONG

ZIP+4/Postal Code:

Yes No

I. Do you have one or more websites?

☐ ☒

If "yes," list all website addresses on Section 1.I. of Schedule D. If a website address serves as a portal through which to access other information you have published on the web, you may list the portal without listing addresses for all of the other information. Some advisers may need to list more than one portal address. Do not provide individual electronic mail (e-mail) addresses in response to this Item.

J. Provide the name and contact information of your Chief Compliance Officer: If you are an *exempt reporting adviser*, you must provide the contact information for your Chief Compliance Officer, if you have one. If not, you must complete Item 1.K. below.

Name:

BENSON FUNG

Other titles, if any:

PRESIDENT

Telephone number:

852-2868-4880

Facsimile number:

852-2522-8886

Number and Street 1:

Number and Street 2:

909 LIPPO CENTER, TOWER II

City:

State:

Country:

ZIP+4/Postal Code:

ADMIRALTY

HONG KONG

Electronic mail (e-mail) address, if Chief Compliance Officer has one:

BHF@GSIMGT.COM

- K. Additional Regulatory Contact Person: If a person other than the Chief Compliance Officer is authorized to receive information and respond to questions about this Form ADV, you may provide that information here.

Name:

MAGNUS FUNG

Titles:

DIRECTOR

Telephone number:

852-2868-4880

Facsimile number:

852-2522-8886

Number and Street 1:

909 LIPPO CENTER; TOWER II

Number and Street 2:

City:

State:

Country:

ZIP+4/Postal Code:

ADMIRALTY

HONG KONG

Electronic mail (e-mail) address, if contact person has one:

BHF@GSIMGT.COM

- L. Do you maintain some or all of the books and records you are required to keep under Section 204 of the Advisers Act, or similar state law, somewhere other than your *principal office and place of business*?

Yes No

☒ ☐

If "yes," complete Section 1.L. of Schedule D.

- M. Are you registered with a *foreign financial regulatory authority*?

Yes No

☐ ☒

Answer "no" if you are not registered with a foreign financial regulatory authority, even if you have an affiliate that is registered with a foreign financial regulatory authority. If "yes," complete Section 1.M. of Schedule D.

- N. Are you a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934?

Yes No

☐ ☒

If "yes," provide your CIK number (Central Index Key number that the SEC assigns to each public reporting company):

Yes No

- O. Did you have \$1 billion or more in assets on the last day of your most recent fiscal year?

☐ ☒

- P. Provide your *Legal Entity Identifier* if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial

marketplace. In the first half of 2011, the *legal entity identifier* standard was still in development. You may not have a *legal entity identifier*.

SECTION 1.B. Other Business Names

No Information Filed

SECTION 1.F. Other Offices

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest five offices (in terms of numbers of *employees*).

Number and Street 1:

909 LIPPO CENTER, TOWER II

Number and Street 2:

ADMIRALTY

City:

HONG KONG

State:

Country:

HONG KONG

ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐

Telephone Number:

85228684880

Facsimile Number:

85225228886

SECTION 1.L. Location of Books and Records

Complete the following information for each location at which you keep your books and records, other than your *principal office and place of business*. You must complete a separate Schedule D Section 1.L. for each location.

Name of entity where books and records are kept:

HSBC INSTITUTIONAL TRUST SERVICES (ASIA) LIMITED

Number and Street 1:

1 QUEEN'S ROAD CENTRAL

Number and Street 2:

City:

HONG KONG

State:

Country:

HONG KONG

ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐

Telephone Number:

Facsimile number:

852 36635500

852 34092693

This is (check one):

- ☐ one of your branch offices or affiliates.
- ☐ a third-party unaffiliated recordkeeper.
- ☒ other.

Briefly describe the books and records kept at this location:

PLEASE SEE SCHEDULE D - MISCELLANEOUS

SECTION 1.I. Website Addresses

No Information Filed

SECTION 1.M. Registration with Foreign Financial Regulatory Authorities

No Information Filed

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