MALASPINA GINO E Form 3 March 29, 2019 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> MALASPINA GINO E	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ASA Gold & Precious Metals Ltd [ASA]				
(Last) (First) (Mide	03/26/2010				5. If Amendment, Date Original Filed(Month/Day/Year)	
3 CANAL PLAZA, SUITE	E 600				•	
(Street)		(Check all applicable) 6. Individual or Joint/Group			lual or Joint/Group	
PORTLAND, ME 04101		Director XOfficer (give title below) Sec	10% Own Other (specify below) pretary	_X_Form Person	eck Applicable Line) filed by One Reporting filed by More than One Person	
(City) (State) (Zij	Table I - 2	Non-Derivativ	e Securities	Beneficially	y Owned	
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)	F [0 (1	Ownership Ov	Nature of Indi wnership hstr. 5)	irect Beneficial	
Reminder: Report on a separate line owned directly or indirectly.	for each class of securities benefic	cially SEC	C 1473 (7-02)			
information required to	o respond to the collection of contained in this form are no respond unless the form disp lid OMB control number.	t				
Table II - Derivative	e Securities Beneficially Owned (e.g., puts, calls, wa	arrants, option	s, convertible	e securities)	
1. Title of Derivative Security (Instr. 4)	Expiration Date Securit	e and Amount of ties Underlying tive Security 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

2005

0.5

3235-0104

January 31,

Number:

Expires:

response...

Estimated average burden hours per

1

Reporting Owners

Reporting Owner Name / Addres	s	Relationships					
		10% Owner	Officer	Other			
MALASPINA GINO E 3 CANAL PLAZA SUITE 600 PORTLAND, ME 04101	Â	Â	Secretary	Â			
Signatures							
Gino Malaspina 03	/29/2019						
<u>**</u> Signature of Reporting Person	Date						

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.