

FORM ADV

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

Primary Business Name: GOLDENTREE ASSET MANAGEMENT LP	CRD Number: 112753
Other-Than-Annual Amendment - All Sections	Rev. 10/2012
5/24/2017 10:36:47 AM	

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):
GOLDENTREE ASSET MANAGEMENT LP
- B. Name under which you primarily conduct your advisory business, if different from Item 1.A.:
GOLDENTREE ASSET MANAGEMENT LP
- 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: **801-58286**
(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: **112753**
- 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: | Number and Street 2: |
| 300 PARK AVENUE | |
| City: | State: |
| NEW YORK | New York |
| Country: | ZIP+4/Postal Code: |
| United States | 10022 |
- 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:
9:00A.M. TO 5:00P.M.
- (3) Telephone number at this location:
212-847-3500
- (4) Facsimile number at this location:
212-847-3494
- G. Mailing address, if different from your *principal office and place of business* address:
- | | |
|----------------------|----------------------|
| Number and Street 1: | Number and Street 2: |
| City: | State: |
| Country: | 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: | Number and Street 2: |
| City: | State: |
| Country: | ZIP+4/Postal Code: |
- I. Do you have one or more websites?

Yes No