FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
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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). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

| | tion 1(b). | ide. 000 | F | | | | | | | | ies Exchang mpany Act o | | 1934 | | | nours | per re | esponse: | 0.5 |
|--|---|--|---|---|---|------|---|---|---------------------|--------|---|---------|---|--|---|---|-----------|--|---------|
| Name and Address of Reporting Person* Life Science Biosensor Diagnostics Pty Ltd | | | | 2. Issuer Name and Ticker or Trading Symbol GBS Inc. [GBS] | | | | | | | | | Check a | all appli Directo | onship of Reporti Il applicable) Director | | (10% O | Owner | |
| (Last) | (Fir | , | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/08/2022 | | | | | | | | | | Officer below) | r (give title | | Other (below) | specify |
| LEVEL: | LEVEL 9, 85 CASTLEREAGH STREET | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) SYDNE | Y C3 | 2 | 000 | _ | | | | | | | | | X | , | | | | | |
| (City) | (St | ate) (Z | ip) | | | | | | | | | | | | | | | | |
| | | Table | I - Non-Der | ivativ | e Se | curi | ties A | cq | uired, | Dis | posed of | , or B | enefic | ially C | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (AD Disposed Of (D) (Instr. 3) | | | | 4 and Securi Benefi Owned | | ities F icially (i d Following (i | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | (A) o | Price | , т | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 02/0 | | | 8/202 | /2022 | | | S | | 100,000 | D | \$0. | .89 2,2 | | 7,832 | | D | | | |
| | | Tal | ole II - Deriv (e.g., | | | | | | | | osed of, convertib | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Ye | Co | Transaction of Code (Instr. Derivative | | | Expiration Date Ame (Month/Day/Year) Sec Und Deri Sec | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Prio Deriva Secur (Instr. | ative rity . 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4) | Owner Form: Direct or Indi (I) (Inst | Ownership | Beneficia Ownershi ct (Instr. 4) | |
| | | | | Code \ | | | (A) (D | D) | Date Exercisable | | Expiration Date | | Amount or Number of Shares | | | | | | |

Explanation of Responses:

/s/ George Syrmalis

02/10/2022

** Signature of Reporting Person Date

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

- * 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.