### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB 3235Number: 0287
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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respo	onses)													
1. Name and Addre GHAURI SALIM	ss of Reporting Person U		2. Issuer Na Symbol NETSOL 7 [NTWK]				Ü		X Director X Officer (give	neck all	applicab	` '		
C/O NETSOL T	(First) (Middle ECHNOLOGIES LABASAS ROAL	,	3. Date of Ea (Month/Day/ 05/17/2010	Year)	nsact	ion			below)	Pres	sident			
CALABASAS, C	(Street) CA 91302		4. If Amendr Filed(Month/D		te Ori	ginal			6. Individual or Applicable Line) _X_ Form filed by I Form filed by I	One Repo	orting Pers	on		
(City)	(State) (Zip)		Table I -	Non-De	rivati	ive Securi	ities .	Acqui	red, Disposed	of, or I	Beneficia	ally Owne	d	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execu	reemed tion Date, if th/Day/Year)	3. Transac Code (Instr. 8	tion	4. Securit Acquired Disposed (Instr. 3,	(A) of (I	D) l 5)	5. Amount of Securities Beneficially O Following Re	wned ported	Form: Direct (		direct ficial ership	
				Code	V	Amount	(A) or (D)		Transaction(s) (Instr. 3 and 4		or Indir (I) (Instr. 4	Ì	. 4)	
Common Stock	03/31/2010	03/31	1/2010	A		62,500	A	\$ 0 (1)	736,425 (1)		D			
Common Stock	05/14/2010	05/14	1/2010	P		350,000	A	\$ 0.87	1,086,425		D			
Reminder: Report or directly or indirectly	n a separate line for e	ach cla	ss of securitie	es benefic	cially	owned								
					inf red	ormatior quired to	res	ntaine pond	nd to the colle ed in this form unless the fo control numb	n are r rm dis	not	(	(9-02)	
			tive Securitie ıts, calls, wa	-		-			eficially Owned	i				
1. Title of 2. Derivative Convers Security or Exerc	3. Transaction Date (Month/Day/Yea	Exe	Deemed ecution Date,	4. Trans Code		5. Number of	r a	nd Exp	Exercisable piration Date I/Day/Year)	7. Titl Amou Under	unt of		9. Number of Derivative Securities	10. Own Forn

1. Title of	2.	<ol><li>Transaction</li></ol>	3A. Deemed	4.	5.		<ol><li>Date Exer</li></ol>	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numl	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Acqu	ired			4)			Following	Direct (D)	
					(A) o	r						Reported	or Indirect	
					Dispo	osed						Transaction(s)	(I)	
					of (D	)						(Instr. 4)	(Instr. 4)	
					(Instr	. 3,								
					4, and	15)								
										Amount				
							_							
							Date	Expiration Date	Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

### **Reporting Owners**

Domestine Occurrent Name / Address		Relation	ships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
GHAURI SALIM U C/O NETSOL TECHNOLOGIES, INC. 23901 CALABASAS ROAD, SUITE 2072 CALABASAS, CA 91302	X		President	

#### **Signatures**

/s/ Salim Ghauri	05/17/2010
Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* 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).
- (1) Previously reported as part of a grant of 250,000 shares vesting quarterly over 2010.

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.