FORM 4

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

| OMB APPROVAL | | | | |
|--------------------------|--------|-----|--|--|
| OMB Number: | 3235-0 | 287 | | |
| Estimated average burden | | | | |
| nours per response | e | 0.5 | | |

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

| | pe Response | ,5) | | | | | | | | | | | | |
|---|---------------------------------------|-------------------------|--|--|--|--------|---|--|---------------|--|--------------------------------------|--|--|-------------------|
| 1. Name and Address of Reporting Person * BECKERT EUGEN | | | 2. Issuer Name and Ticker or Trading Symbol NETSOL TECHNOLOGIES INC [NTWK] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) (First) (Middle) C/O NETSOL TECHNOLOGIES, INC., 24025 PARK SORRENTO, SUITE 410 | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2016 | | | | | r (give title belo | | Other (specify be | low) | | | |
| (Street) CALABASAS, CA 91302 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City |) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own | | | | Owned | | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) | | Execution Date, if Code | | · · · · · · · · · · · · · · · · · · · | | of | d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Following (s) | 6. 7. Nature Ownership Form: Beneficial Direct (D) Ownership | | | | |
| | | | | | Code | V | Amount | (A) or (D) | Price | or Indirec (I) (Instr. 4) | | (I) | (Instr. 4) | |
| Common | Stock | | 09/30/2016 | 09/30/2016 | A | | 3,750 | I A | \$ 0 (1) | 43,500 | | | D | |
| Common | Stock | | 10/01/2016 | 10/01/2016 | A | | 9,917 | I A | \$ 0 (1) | 53,417 | | | D | |
| Reminder: indirectly. | Report on a | separate line f | or each class of secu | rities beneficially o | wned dire | Pers | ons wh ained ir | this fo | rm ar | e not req | uired to re | formation espond unl | ess | C 1474 (9- 02) |
| | | | | Perivative Securitions.g., puts, calls, was | - | | • | * | | • | I | | | |
| 1. Title of | Conversion Date or Exercise (Month/D | | n 3A. Deemed | 4. | 5. Numbe | r 6. D | | | | itle and | 8. Price of | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | C 10 | |
| | or Exercise Price of Derivative | | Year) any | Code Year) (Instr. 8) | of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | e (Mo | Expiratic nth/Day/ | | Uno Sec | ount of derlying urities tr. 3 and | Derivative Security (Instr. 5) | Securities Beneficially Owned Following Reported Transaction | Ownersh Form of Derivativ Security: Direct (D or Indirect | (Instr. 4) |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|---|---------------|-----------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| BECKERT EUGEN C/O NETSOL TECHNOLOGIES, INC. 24025 PARK SORRENTO, SUITE 410 CALABASAS, CA 91302 | X | | | | |

Signatures

| /s/ Eugen Beckert | 10/04/2016 |
|---------------------------------|------------|
| **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) Issued as compensation for services rendered

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.