F	ORN	15
-	Check this box if	no longer

cheen and oon in no longer
subject to Section 16. Form 4
or Form 5 obligations may
continue. See Instruction 1(b).
Form 3 Holdings Reported

Form 4 Transactions

Reported

Г

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

OMB APPROVAL OMB Number: 3235-0362 Estimated average burden hours per response... 1.0

ANNUAL 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

1. I tunie una l'iduless of reporting l'erson			2. Issuer Name and Ticker or Trading Symbol NETSOL TECHNOLOGIES INC [NTWK]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended				X Officer (give title below) Other (specify below) Secretary / General Counsel				
CONTROL TRO			(Month/Day/Year)				ľ	Secretary / General Counsel			
C/O NETSOL TEC		20,	06/30/2021								
INC.,, 23975 PARK SORRENTO, SUITE 250											
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line)			
CALABASAS,, CA 91302			_X_Form Filed by One Reporting Form Filed by More than One								
(City)	(State)	(Zip)	Tab	Table I - Non-Derivative Securities Acquirate				ired, Disposed of, or Beneficially Owned			
1.Title of Security		2. Transaction	2A. Deemed	3. Transaction	4. Securi	ties Acq	uired	5. Amount of Securities	6.	7. Nature	
(Instr. 3)		Date	Execution Date, if	Code	(A) or Disposed of (D)				Ownership		
		(Month/Day/Year))	Issuer's Fiscal Year Form: Benefici					
			(Month/Day/Year)					(Instr. 3 and 4)	Direct (D) or Indirect	Ownership	
						(A) or			(I)	(Instr. 4)	
					Amount	· ·	Price		(Instr. 4)		
Common Stock								81,050	D		

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

Persons who respond to the collection of information contained in this 5EC 2270 (9-02) form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	er	and Expiration Date		Amount of		Derivative	of	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day/Year)		Underlying		Security	Derivative	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriva	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Securi	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqui	red			4)			Owned at	Direct (D)	
					(A) or	•						End of	or Indirect	
					Dispo	sed						Issuer's	(I)	
					of (D)							Fiscal Year	(Instr. 4)	
					(Instr.	· · ·						(Instr. 4)		
					4, and	5)								
										Amount				
							Data	Exmination		or				
							Date Exercisable	Expiration	Title	Number				
							Exercisable	Date		of				
					(A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
MCGLASSON PATTI L W C/O NETSOL TECHNOLOGIES, INC., 23975 PARK SORRENTO, SUITE 250 CALABASAS,, CA 91302			Secretary / General Counsel					

Signatures

/s/ Patti L. W. McGlasson	08/13/2021
**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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.