FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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

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

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

							(	,			' '									
	nd Address of	Reporting Person'							cker or Tra dings, I		Symbol EXLS	]		(Ch	Relationship eck all appl	icable)	ıg Per	son(s) to Is	suer	
Willito / Will Elizabeth					$\vdash$									X Direct	or		10% Ov	vner		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2023									Officer (give title Other (sp below) below)				specify	
320 PARK AVENUE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Ctroot)										X Form filed by One Reporting Person										
(Street) NEW Y	ORK N	Y	10022											Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)		Ru	Rule 10b5-1(c) Transaction Indication														
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tabl	e I - No	n-Deriv	ative	Sec	uriti	ies Ac	quired,	Dis	posed	of, or I	Bene	ficia	lly Owne	d				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Transaction Dispose Code (Instr. 5)		urities Acquired (A) or led Of (D) (Instr. 3, 4 and			Beneficially Owned Following		Form: Direct (D) or Indirect (I) (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A		or P	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock, par value \$0.001 per share 05/1			05/10/	2023	2023					557	557 A		\$27.6	2 5	557		D			
Common Stock, par value \$0.001 per share 05,				05/10/	2023				S		557 D		\$	3152.7	74	0		D		
Common Stock, par value \$0.001 per share 05/10/2							M <sup>(1)</sup>		2,536 A		-	\$27.6				D				
Common Stock, par value \$0.001 per share 05/11/2									S		3	I	\$	5147.3	32 2,	533		D		
		Ta	able II -								osed of converti				/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) if any (Month/Day/Year) Code (Month/Day/Year)			Transac Code (Ir	nsaction of E			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab	le E	Expiration Date	Title	or Nu of	nount mber ares						
Employee Stock Options (right to buy)	\$27.62	05/10/2023			M <sup>(1)</sup>			557	12/29/201	4 0	11/02/2024	Commo Stock, par valu \$0.001 per shar	5	557	\$0	2,536		D		
Employee Stock Options (right to buy)	\$27.62	05/10/2023			M <sup>(1)</sup>			2,536	12/29/201	4 0	1/02/2024	Commo Stock, par valu \$0.001 per shar	2,	536	\$0	0		D		

## **Explanation of Responses:**

1. On January 2, 2014, the reporting person was granted 3,093 stock options. 100 percent of these options became vested and exercisable on December 29, 2014.

## Remarks:

Mr. Oseni is the Company's Head of Administration and Accounts

/s/ Lazbart Oseni, Attorney-in-

05/12/2023

<u>Fact</u>

\*\* 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.