SEC Form 4												
FORM 4	STATES S	ECURITIES Washingto										
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Filed pursuan	t to Section 16(a) o tion 30(h) of the Inv	of the Se	ecuritie	es Exchange A		Es	IB Number: iimated average burg urs per response:	3235-0287 den 0.5			
1. Name and Address of Reporting Perso <u>Bartlett Thomas A</u> (Last) (First)	on* (Middle)	ExlSe	er Name and Ticker ervice Holdin of Earliest Transac 2024	i <u>gs, Ir</u>	<u>1c.</u> [EXLS]			ationship of Repor (all applicable) Director Officer (give tit below)	ting Person(s) to Is 10% (e Other below	Owner (specify	
C/O EXLSERVICE HOLDINGS, INC. 320 PARK AVENUE (Street) NEW YORK NY 10022			4. If Amendment, Date of Original Filed (Month/Day/Year)						ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Che	10b5-1(c) T eck this box to indicat isfy the affirmative de	e that a	transad	ction was made			ten plan that is inten	ded to		
Ta	ble I - Non-De	erivative Se	ecurities Acqu	uired,	Disp	osed of, o	r Ben	eficially	Owned			
1. Title of Security (Instr. 3) Date (Month/E			Execution Date,		iction Instr.	4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
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/Year)	4. Transa Code (8)		5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. 3 and 5)	tive ties red sed 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	(1)	03/06/2024		A		1,973		(2)	(2)	Common Stock, par value \$0.001 per share	1,973	\$0	1,973	D	

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of the Company's common stock upon settlement.

2. The restricted stock units vest upon the earlier of (i) the first anniversary of the date of grant, (ii) the date on which the reporting person's term as a member of the Board of Directors of ExlService Holdings, Inc. (the "Board") expires if the reporting person is not subsequently elected to a new term on the Board, and (iii) the occurrence of a "Change in Control", as defined in the ExlService Holdings, Inc. 2018 Omnibus Incentive Plan (the "Plan"), and such awards settle upon the earlier of (i) the reporting person's death, (ii) the occurrence of a "Change of Control", as defined in the Plan and (iii) the date that is 180 days following the date on which the reporting person ceases to serve as a member of the Board for any reason other than due to such reporting person's death or, if later, the date of the reporting person's separation from service.

Remarks:

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

/s/ Lazbart Oseni, Attorney-in-03/08/2024

** Signature of Reporting Person Date

Fact

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.