FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
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OMB APPROVAL										
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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).

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. Name and Address of Reporting Person* STUDENMUND JAYNIE M						2. Issuer Name and Ticker or Trading Symbol ExlService Holdings, Inc. [EXLS]										all applic	r 10% Owne		wner	
(Last) 320 PAR	(Fi K AVENU)		(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/17/2021										Officer below)	(give title	Other (: below)	specify	
(Street) NEW Y(10022 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reportin Person										n				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,		Cod	Transaction Dis		Dispose	ities Acquir d Of (D) (In:	ed (A) or str. 3, 4 ar	4 and Securiti Benefic Owned		ecurities For seneficially (D)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Cod	ie V		Amount	ount (A) or (D)					Transact		
	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)	ative Conversion Date Execution Date, Transactity or Exercise (Month/Day/Year) if any Code (I				5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. 3 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	f g Security	De Se (In	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	sable	Ex Da	piration ate	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	06/17/2021			A		1,420		(2)			(2)	Common Stock, par value \$0.001 per share	1,420		\$0	6,819		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, 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 in Control", as defined in the ExIService 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

06/21/2021

** 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.