FORM 4

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

Washington, D.C. 20549

| STATEMENT | OF CH | IANGES | IN BEN | EFICIAL | <b>OWNERSHIP</b> |
|-----------|-------|--------|--------|---------|------------------|

| OMB APPR             | ROVAL     |
|----------------------|-----------|
| OMB Number:          | 3235-0287 |
| Estimated average bu | ırden     |
| hours per response:  | 0.5       |

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 <b>and</b> Ticker or Trading Symbol  ExlService Holdings, Inc. [ EXLS ] |         |                                      |   |   |                  |   |   | Relationship<br>neck all appli<br>X Directo   | cable)<br>or          | g Pers   | 10% Ov   | vner |
|--|---|--|---|-----------------|--|---------|--------------------------------------|---|---|------------------|---|---|---|-----------------------|--|--|------|
| (Last) (First) (Middle) 280 PARK AVENUE  |   |  |   |                 | 3. Date of Earliest Transaction (Month/Day/Year) 09/12/2018                            |         |                                      |   |   |                  |   | Officer<br>below                                    | (give title   | Other (spec<br>below) |  | specify  |      |
| (Street) NEW YO  |   |  | 10017<br>Zip)   | 4. l            | Line) X Form fi  |         |                                      |   |   |                  |   |   | Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting n |                       |  |  |      |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |   |                 |  |         |                                      |   |   |                  |   |   |   |                       |  |  |      |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |   |  |   | Execution Date, |  | Code (I | Transaction Disposed Code (Instr. 5) |   | rities Acquired (A) o<br>ed Of (D) (Instr. 3, 4 a |                  | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                                     |                       | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |  |      |
|  |   |  |   |                 |  |         |                                      | Code  | v   | Amount           | (A) o<br>(D)  | Price   | Transac<br>(Instr. 3  | tion(s)               |  |  |      |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |   |                 |  |         |                                      |   |   |                  |   |   |   |                       |  |  |      |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                 | ransaction of ode (Instr. Derivative   |         |                                      | 6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  Securities Underlying Derivative Set (Instr. 3 and 4) |   |                  | 3<br>Security   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)      | у                     | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |      |
|  |   |  |   | Code            | v  | (A)     | (D)                                  | Date<br>Exercisable   |   | xpiration<br>ate | Title   | Amount<br>or<br>Number<br>of<br>Shares              |   |                       |  |  |      |
| Restricted<br>Stock<br>Units   | (1)   | 09/12/2018                                 |   | A               |  | 1,240   |                                      | (2)   |   | (2)              | Common<br>Stock,<br>par value<br>\$0.001<br>per share                     | 1,240   | \$0   | 1,240                 |  | 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-Fact 09/14/2018

\*\* 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.