FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingt

wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		

0287 Estimated average burden 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*  KELSO DAVID B						2. Issuer Name <b>and</b> Ticker or Trading Symbol  ExlService Holdings, Inc. [ EXLS ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)		irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Yea							ay/Year)					r (give title	Other (s below)		·	
(Street) NEW YORK NY 10017  (City) (State) (Zip)					-	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
			le I - Nor			_			·		isp								1		
Date			2. Trans Date (Month		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 5) 4. Securit Disposed 5)			ities Acq d Of (D) (	uired Instr.	(A) or 3, 4 and	Benefic Owned	es ially Following	Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								(	Code	,	Amount	(A)	or	Price		ted action(s) 3 and 4)			(Instr. 4)		
Common Stock, par value \$0.001 per share 06/17				7/201	/2017				М		1,94	1,946 A		(1)	6,	6,946		D			
	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. Deeme Execution if any (Month/Da	Date,	4. Transa Code ( 8)		of Deri Sec Acq (A) o Disp of (I	osed D) tr. 3, 4	Expi	ate Exer iration D nth/Day/	ate	Amount Securitie Underly		nt of ties ying tive Security		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	e rcisable	Ex Da	epiration ate	Title	or Nu of	umber						
Restricted Stock Units	(1)	06/17/2017			М			1,946		(2)		(2)	Commo Stock, par valu \$0.001	1	,946	\$0	38,061	ı	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. On June 17, 2016, the reporting person was granted 1,946 restricted stock units, that vest upon the earlier of (i) the first anniversary of the date of grant, (ii) the end of the reporting person's term on the Board if such person is not subsequently elected to a new term on the Board, and (iii) the occurrence of a "Change of Control", as defined in 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 or (iii) the vesting date.

## Remarks:

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

/s/ Lazbart Oseni, Attorney-in-06/20/2017 Fact

\*\* 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.