#### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  TYAGI SANDEEP						2. Issuer Name <b>and</b> Ticker or Trading Symbol ExlService Holdings, Inc. [ EXLS ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify				
(Last) (First) (Middle) 350 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 07/09/2007									X Officer (give title Offier (specify below)  VP, Head of Knowledge Services					
(Street) NEW YORK NY 10022 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(30			n-Deriv	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, or	Ben	nefici	ally	Owne	ed		
1. Title of Security (Instr. 3) 2. 1					2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			d (A) o	or 5. Amount Securities Beneficiall Owned Fol		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price	e		ted action(s) 3 and 4)		(Instr. 4)
Common Stock, par value \$0.001 per share					07/09/2007				S <sup>(1)</sup>		100		D	\$18.06		725,997		D	
Common Stock, par value \$0.001 per share				07/09	07/09/2007				S <sup>(1)</sup>		264		D	\$18.07		725,733		D	
Common Stock, par value \$0.001 per share				07/09/2007					S <sup>(1)</sup>		200		D	\$18.17		725,533		D	
Common Stock, par value \$0.001 per share 0				07/09	07/09/2007						100		D	\$18.18		725,433		D	
Common Stock, par value \$0.001 per share 07/0					07/09/2007						100		D	\$18.2		725,333		D	
Common Stock, par value \$0.001 per share 07/09					07/09/2007						100		D	\$18.23		725,233		D	
Common Stock, par value \$0.001 per share 07/09/					9/2007				S <sup>(1)</sup>		100		D	\$18	3.24	725,133		D	
		Ta									sed of, onvertib					vned			,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 3)		of E		6. Date E Expiratio (Month/D	n Date	e	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		J	Deri	vivative decurity Str. 5) E	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	of Posnons				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	nount imber ares					

# **Explanation of Responses:**

1. This sale was made pursuant to a 10b5-1 plan previously entered into by the reporting person.

Mr. Oseni is the Company's Head of Administration and Accounts. Form 2 of 2 Form 4's

/s/ Lazbart Oseni, Attorney-in-07/10/2007 **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.