FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHAN</b>	<b>GES IN BEN</b>	IEFICIAL O	WNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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*  BAGAI PAVAN						2. Issuer Name and Ticker or Trading Symbol ExlService Holdings, Inc. [ EXLS ]									all appli Directo	cable) or	g Pers	10% Ov	vner
(Last) 280 PAR	(Fi	,	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 09/24/2014								Officer (give title below)  President & COO			:респу	
(Street) NEW YO	ORK N		10017		- 4. I -	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)	ula a Danie	4:	. 0					:	D		- 11 4	<b></b>	•			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N			ion	on 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amoun		unt of 6. C es For ially (D) Following (I) (		n: Direct or Indirect onstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price		Transac (Instr. 3	ction(s)			(Instr. 4)	
Common Stock, par value \$0.001 per share			09/24/2	014	014					8,563	A	\$8.7	5 116		6,134		D		
Common share	Stock, par	value \$0.001 pe	r	09/24/2	014				S <sup>(2)</sup>		8,563	D	\$25.257	2578 <sup>(3)</sup> 107,571 D		D			
		٦	able								posed of, , converti				wned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amoun or Numbe of Shares	r					
Employee Stock Options (right to	\$8.75	09/24/2014			M <sup>(1)</sup>			8,563	(4	1)	02/10/2019	Commor Stock, par value \$0.001	8,563		\$0	25,000		D	

## **Explanation of Responses:**

- 1. On September 24, 2014 the reporting person exercised previously issued options to purchase an aggregate of 8,563 shares of common stock of ExlService Holdings, Inc.
- 2. This sale was made pursuant to a 10b5-1 plan previously entered into by the reporting person.
- 3. This transaction was executed in multiple trades at prices ranging from \$25.10 to \$25.41 per share. The price reported above reflects the weighted average purchase price on the date indicated. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.
- $4.\ 25{,}000$  of these options are currently vested and exercisable.

## Remarks:

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

/s/ Lazbart Oseni, Attorney-in-

09/26/2014

<u>Fact</u>

\*\* 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.