FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to	STATEMENT O					
Section 16. Form 4 or Form 5						
obligations may continue. See						
Instruction 1(b).	Filed pursuar					

F 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* STAGLIN GAREN K						2. Issuer Name and Ticker or Trading Symbol ExlService Holdings, Inc. [EXLS]									all applicable) Director		g Person(s) to Issuer 10% Owne		vner
	,	HOLDINGS, IN	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/14/2013									Officer (give title below)		Other (sp below)		specify
280 PAR	K AVENU.	<u> </u>			4. I	f Ame	ndme	nt, Date	of Origii	nal Fil	ed (Month/D	ay/Year)	6. Lin		or J	Joint/Group	Filing	g (Check Ap	plicable
(Street) NEW Y	ORK N	Y	10017												Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)		-										1301	•			
		Tab	le I - N	on-Deriv	/ative	e Sec	curit	ies Ac	quire	d, Di	sposed o	of, or Be	eneficia	lly Ow	ned	I			
Date				2. Transac Date (Month/Da		Exe) if a	2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			and 5) Securit Benefic Owned		es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount			(A) or (D)	Price	Reporte Transac (Instr. 3		ction(s)			(Instr. 4)			
Common Stock, par value \$0.001 per share 08/14/				08/14/2	2013	013					5,000	A	\$11.87	875 25		5,000		D	
Common Stock, par value \$0.001 per share 08/14/2				2013	013			S ⁽¹⁾		5,000	D	\$27.75	'55 ⁽²⁾ 20,		0,000		D		
		Т	able II								posed of converti			y Owne	ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)				6. Date Exercisa Expiration Date (Month/Day/Yea		te Amount o		of s ng e Security	8. Price Derivat Securit (Instr. 5	ive y	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (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	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Options (right to	\$11.875	08/14/2013			M ⁽¹⁾			5,000	(3)		06/23/2015	Common Stock, par value \$0.001	5,000	\$0		25,000		D	

Explanation of Responses:

- 1. On August 14, 2013 the reporting person exercised previously issued options to purchase an aggregate of 5,000 shares of common stock of ExlService Holdings, Inc.
- 2. This transaction was executed in multiple trades at prices ranging from \$27.69 to \$27.845 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.
- $3.25,\!000$ 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-

08/16/2013

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.