FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

washington, D.C. 20049	OMB APPI	ROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		
OTATEMENT OF STATISES IN BEINE HOIAE OWNERSHIP	Estimated average burden			

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

O WID ALL I	COVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours ner resnonse.	0.5							

Shashank Amit																all applicable)  Director		10% Ov	vner specify
(Last) (First) (Middle) 280 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 11/08/2010									Officer (give title below)  VP & Gen. Cou		Other (s below) unsel/Corp. Sec		
(Street)  NEW Y(			10017 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tab	le I - I	Non-Deri	vative	e Sec	uriti	ies A	cquire	ed, D	isposed o	of, or B	enefic	ially	Owned	ŀ			
Da			2. Transaction Date (Month/Day/Year		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Disposed Of		Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common share	Common Stock, par value \$0.001 per share		11/08/2	010	)10					4,500	A	\$8.8	375	17,879			D		
Common share	Common Stock, par value \$0.001 per share		11/08/2	010				S <sup>(1)</sup>		4,500	A	\$20.6	).6754 <sup>(2)</sup> 1		13,379		D		
		7	able								sposed of , converti				wned		,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)				Expira	e Exerc ation D h/Day/		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	oer					
Employee Stock Options	\$8.875	11/08/2010			<b>M</b> <sup>(1)</sup>			4.500	(3	3)	02/10/2019	Commo Stock,	1	00	\$0	40,500	$\int$	D	

## **Explanation of Responses:**

- 1. On November 8, 2010, the reporting person exercised previously issued options to purchase an aggregate of 4,500 shares of common stock of ExlService Holdings, Inc.
- 2. This transaction was executed in multiple trades at prices ranging from \$20.62 to \$20.700 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. 4,500 of these options are currently vested and exercisable; additional 9,000 options will vest on February 10, 2011, additional 13,500 options will vest on February 10, 2012, and the remaining 18,000 will vest on February 10, 2013.

## Remarks:

(right to

buy)

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

/s/ Lazbart Oseni, Attorney-in-**Fact** 

11/10/2010

\*\* Signature of Reporting Person

\$0.001

per share

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.