FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040	OMB APPROVAL				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287			
OTATEMENT OF OTTAINOED IN BEINEFIGURE OVINERORIII	Estimated average burd	lon			

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).

IIIStruction	11(0).			Filed							npany Act o			4					
Name and . Saltzman		eporting Person*							er or Tradii ngs, Ind						elationship o ck all applica Director	able)	Perso	10% Ow	ner
(Last) (First) (Middle) 280 PARK AVENUE				,	3. Date of Earliest Transaction (Month/Day/Year) 02/26/2015									-	below)	er (give title w) & Gen. Counsel		Other (specify below) I/Corp. Sec'y	
Street) NEW YOR	RK NY		0017 ip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc) 【 Form fil	Form filed by More than One Reporting				
		Table	e I - Non	-Deriva	ative	Secu	urities	Acc	uired, [Dis	posed of	f, or I	Bene	ficially	y Owned				
Title of Security (Instr. 3) 2. Transa Date (Month/L				Ex f) if a	Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5)					5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A (C	A) or D)	Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)			4)		
		Та									osed of, onvertib				Owned				
Title of Derivative Security Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			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 Exercisab		Expiration Date	Title		Amount or Number of Shares					

Explanation of Responses:

(1)

(1)

1. Each restricted stock unit and performance-based restricted stock unit represents a contingent right to receive one share of the Company's common stock upon settlement.

Α

A

6.000

6,000

(2)

(3)

- 2. 10 percent of the restricted stock units will vest on February 26, 2016; an additional 20 percent will vest on February 26, 2017; an additional 30 percent will vest on February 26, 2018; and the remaining 40 percent will vest on February 26, 2019. Vesting will be accelerated upon certain termination of employment events and upon a "Change in Control" (as defined in the ExlService Holdings, Inc. 2006 Omnibus Award Plan).
- 3. The performance-based restricted stock units will cliff vest on December 31, 2017. Vesting of some or all of the performance-based restricted stock units may be accelerated upon or in connection with the occurrence of a "Change in Control" as such term is defined in the agreement governing the grant of the performance-based restricted stock units.

Restricted

Stock Units

Performance-

Based Restricted

Stock Units

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

/s/ Lazbart Oseni, Attorney-in-03/12/2015 **Fact**

** Signature of Reporting Person

Title Common

02/26/2025

02/26/2025

par value \$0.001

per share Common

Stock

par value \$0.001

per share

6,000

6,000

\$0.00

\$0.00

6.000

6,000

D

D

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).

02/26/2015

02/26/2015

** 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.