FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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| heck this box if no longer subject |
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| Section 16. Form 4 or Form 5       |
| bligations may continue. See       |
|                                    |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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*  Tyagarajan N. V.               |  |  |        |                                   |        | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Genpact LTD [ G ] |  |  |   |       |                        |  |                               |   | k all app<br>Direc   | tor   | ng Pei                     | 10% O  | wner   |
|--|--|--|--------|-----------------------------------|--------|--|--|--|---|-------|------------------------|--|-------------------------------|---|--|---|----------------------------|--|--|
| (Last) (First) (Middle) C/O GENPACT LLC 1155 AVENUE OF THE AMERICAS, 4TH |  |  |        |                                   |        | 3. Date of Earliest Transaction (Month/Day/Year) 01/12/2022          |  |  |   |       |                        |  |                               |   | X Officer (give title below) Other (specify below)  President and CEO              |   |                            |  |  |
| FLOOR  |  |  |        |                                   |        | 4. If Amendment, Date of Original Filed (Month/Day/Year)             |  |  |   |       |                        |  |                               | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |   |                            |  |  |
| (Street) NEW YO  | (Street) NEW YORK NY 10036   |  |        |                                   |        |  |  |  |   |       |                        |  |                               | ,   | X Form filed by One Reporting Person  Form filed by More than One Reporting Person |   |                            |  |  |
| (City)   | (St  | ate) (Ž                                    | Zip)   |                                   |        |  |  |  |   |       |                        |  |                               |   |  |   |                            |  |  |
|  |  | Table                                      | I - No | n-Deriva                          | tive S | Secui  | rities   | Acq  | uired   | , Dis | posed of               | , or B   | Benefi                        | cially  | y Own  | ed  |                            |  |  |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)           |  |  |        | Execution Date,                   |        |  | 3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) |  |   |       | 4 and Securi<br>Benefi |  | ties<br>cially<br>I Following | Forn<br>(D) o   | n: Direct<br>or Indirect<br>nstr. 4)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)   |                            |  |  |
|  |  |  |        |                                   |        |  |  |  | Code  | v     | Amount                 | (A) (D)  | or Pri                        | ce  | Transa   | action(s)<br>3 and 4)   |                            |  | (111511.4)   |
| Common Shares 01/12/20   |  |  |        |                                   |        | 022  |  |  | F   |       | 92,452(1)              | D  | \$                            | 52.12 5   |  | 31,313  |                            | D  |  |
| Common Shares  |  |  |        |                                   |        |  |  |  |   |       |                        |  | 10                            | 10,000  |  |   | By<br>Trust <sup>(2)</sup> |  |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |        |                                   |        |  |  |  |   |       |                        |  |                               |   |  |   |                            |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                      | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | if any | emed<br>tion Date,<br>n/Day/Year) |        | ansaction<br>de (Instr.  |  | vative<br>rities<br>vired<br>rosed<br>)<br>r. 3, 4<br>5) | 6. Date Exerc<br>Expiration D<br>(Month/Day/ <sup>t</sup> ) |       | ate                    | Amount of Securities Underlying Derivative Security (Ins 3 and 4)  Amou or Numb of |                               | nt<br>er  |  | 9. Number<br>derivative<br>Securities<br>Beneficiall'<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | y                          | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |

## **Explanation of Responses:**

- 1. Represents shares withheld for payment of taxes upon the vesting of performance share units granted on February 13, 2019 under the Genpact Limited 2017 Omnibus Incentive Compensation Plan.
- 2. These shares are held in trust for the benefit of the reporting person's immediate family members. The reporting person's spouse is one of the trustees of the trust. The reporting person disclaims beneficial ownership of the reported securities held by the trust except to the extent of his pecuniary interest therein.

/s/ Thomas D. Scholtes, as Attorney-in-fact for N.V.

01/12/2022

<u>Tyagarajan</u>

\*\* Signature of Reporting Person

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.