FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average b | ourden | | | | | | | | | |

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* Singh Arvinder | | | | | 2. Issuer Name and Ticker or Trading Symbol Genpact LTD [G] | | | | | | | (Ch | eck all applic | able) | erson(s) to Issu 10% Ov Other (s | /ner | |
|--|---|--|---|------------|--|------------------|--|--|--|-----------------|--|-------------------------------------|---|--|---|--|--|
| (Last) (First) (Middle) C/O GENPACT LLC | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/31/2013 | | | | | | | | X Officer (give title below) Other (specibelow) Senior Vice President | | | респу | |
| 105 MADISON AVENUE, 2ND FLOOR | | | | | 4 If Amandment Data of Original Filed (Manth/Data) | | | | | | | 6.1 | C. Individual or Jaint/Craus Filing (Charles Armitechte | | | | |
| (Street) NEW YORK NY 10016 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | Advidual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/Date) | | | | е | | Execution if any | 2A. Deemed Execution Date, f any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Disposed O | | ities Acquired (A) o d Of (D) (Instr. 3, 4 a | | 5. Amour Securities Beneficia Owned For | s Formally (D) (collowing (I) (I | m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | <i>,</i> | Amount | (A) o (D) | r Price | Transacti (Instr. 3 a | on(s) | | Instr. 4) | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 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) | Code (Inst | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title an of Securit Underlyin Derivative (Instr. 3 an | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | piration ate | Title | Amount or Number of Shares | | (Instr. 4) | 5) | | |
| Employee Stock Option (Right to Buy) | \$19.35 | 05/31/2013 | | A | | 145,000 | | (1) | 05 | 5/30/2023 | Common Shares | 145,000 | \$0.00 | 145,000 | D | | |

Explanation of Responses:

1. The option vests 50% on January 10, 2016 and 50% on January 10, 2018.

Remarks:

/s/ Heather White, as Attorneyin-fact for Arvinder Singh

06/04/2013

** 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.