FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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37 Estimated average burden 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

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1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Cogny Patrick					<u>Ge</u>	Genpact LTD [G]								10	JIICCK	Direc	,		wner	
															X		er (give title			(specify
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)								Λ	below)		b	below)	
C/O GENPACT LLC						02/19/2020								Senior Vice President						
1155 AVENUE OF THE AMERICAS, 4TH FLOOR						4 If Amandment Date of Original Filed (Month/DayNear)									C testicistual au Taiat/Oueur Filian (Obselt & U. 11					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	NDIZ NI	7	0026												X	Form	n filed by One	e Reporting	Pers	on
NEW YO	ORK N	Y 1	.0036												Form filed by More than One Reporting					
					١.											Pers	on			
(City)	(St	ate) (Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed			
1. Title of S	ecurity (Inst	r. 3)		2. Transa	action							ties Acquired (A) o						6. Owners		7. Nature
				Date (Month/D	Day/Yea	Execution Date, ay/Year) if any			Transaction Disposed Of (D) (Instr. 3 Code (Instr. 5)			3, 4 ar	Ben		cially		Form: Direct (D) or Indirect	of Indirect Beneficial		
						(Month/Day/Year)			8) 8)				Owned Repor		l Following ted	(I) (Instr. 4)	(I) (Instr. 4)	Ownership (Instr. 4)		
						Code	v	Amount		(A) or Price		Trans		action(s) 3 and 4)			(
						-	-	-	- ` 							_				
Common Shares 02/19/3									A		54,644	1 ⁽¹⁾ A		\$	99,714		9,714	D		
		Ta	hle II - F	Derivati	ive S	ecu	rities	Δcaui	ired D	isno	sed of,	or B	enefi	ciall	v Ov	vned				
		10									onvertib				,	mea				
1. Title of	2.	3. Transaction	3A. Deem		Code (Instr		ion of		6. Date Exercisable and			7. Title and				rice of 9. Number o				11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any						Expiration (Month/E		Amount of Securities			Derivative Security		derivative Securities	Owner Form:	ship	of Indirect Beneficial	
(Instr. 3)	Price of Derivative	, ,	(Month/Da	ıy/Year)					Ur				Underlying Derivative		(Instr. 5)		Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)
	Security					(A) or Security (Instr.						str. 3	3		Following	(I) (Inst		(1113411 4)		
								Disposed of (D)					and 4)				Reported Transaction	(s)		
							(Instr. 3, 4 and 5)										(Instr. 4)			
				ŀ				. 				Amoun		nunt						
													or							
								Date		Expiration		of	nber							
					Code	V	(A)	(D)	Exercisa	ıble	Date	Title	Sha	res						

Explanation of Responses:

1. The reporting person was granted performance share units (PSUs) on February 13, 2019 that were subject to performance conditions which have been satisfied. Each PSU represents the contingent right to receive one common share. The PSUs will vest on January 10, 2022 subject to the reporting person's continued service through such date.

/s/ Thomas D. Scholtes, as

Attorney-in-fact for Patrick 02/21/2020

Cogny

** 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.