FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT	OF CHA	NGES IN	<b>BENEFICIAL</b>	OWNERSHIP
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	burden								
hours per response	: 0.5								

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-
4/-> 0 1

Instruction 1(b).

1. Name and Address of Reporting Person*  Mehta Piyush				2. Issuer Name <b>and</b> Ticker or Trading Symbol Genpact LTD [ G ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
			301										ector		10% Ov				
,					-									-	Offi below	cer (give title ow)		Other (s	specify
(Last) (First) (Middle) C/O GENPACT LLC					3. Date of Earliest Transaction (Month/Day/Year) 01/10/2025								Senior Vice President and CHRO						
521 FIFT	ΓΗ AVENU	JE, 14TH FLOO	R																
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW Y	ORK N	Y 1	0175												For	m filed by On		Ü	
																m filed by Mo son	re tnar	n One Repo	orting
(City)	(S	tate) (2	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or l	Ben	eficia	ally Ow	ned			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr					d Secu Bene Own	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
						Code	v	Amount (		or	Price	Trans	saction(s) r. 3 and 4)			(Instr. 4)			
Common	Shares			01/10/2	025		S		12,000(1)	000 <sup>(1)</sup> D \$		\$42.8	33 1:	3 151,182(2)		D			
		Tai	ble II -								osed of, convertib					ed		,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) of tive				saction le (Instr. Securitie Acquirec (A) or Dispose of (D) (Instr. 3, and 5)		rative rities sired r osed )	6. Date Exerci Expiration Dat (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		; ;	8. Price o Derivativo Security (Instr. 5)		Owner Form Direct or Inc (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or	ount nber ires					

## **Explanation of Responses:**

- 1. Represents shares withheld for payment of taxes upon the vesting of restricted share units and performance share units granted under the Genpact Limited 2017 Omnibus Incentive Compensation Plan and exempt under Rule 16b-3.
- 2. Includes 133 shares acquired under the Genpact Employee Stock Purchase Plan ("ESPP") since the reporting person's Form 4 filed on November 14, 2024. The reporting person currently holds a total of 9,822 shares under the ESPP.

## Remarks:

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

01/14/2025

Mehta

\*\* 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.