FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

,	Washington,	D.C.	20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

(First)

8550 WEST DESERT INN ROAD,

(Middle)

# 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

	nd Address o	f Reporting Person <sup>*</sup>											Symbol XELA ]			(Cł	Relationship neck all app X Direc	licable) tor	]	X 10	)% Ow	ner
(Last) 8550 W SUITE 1	EST DESE	irst) (I RT INN ROAD,	Middl	e)		Date /15/:			t Tra	nsactio	on (Mo	onth	/Day/Year)				X Office below	•	titie Chairma	be	ther (s elow)	pecify
(Street) LAS VE	GAS, N	V 8	9117	7	4. 1	If Am	endr	ment,	Date	e of Ori	ginal I	File	d (Month/D	ay/Yea	7)	Lin	Form	filed by	Froup Fili One Re More th	porting	Perso	n
(City)	(S		Zip)																			
1. Title of	Security (Ins		1 - 1	2. Transaction Date (Month/Day/Yo	n	2A. I Exec if an	Deen cutio		е,	3. Transa Code (	action	4.	Securities a	Acquire	d (A) or		5. Amount Securities Beneficiall Owned Following	of	6. Owner Form: D (D) or Indirect (Instr. 4	Direct	Indire Bene	ficial ership
										Code	v	Aı	mount	(A) or (D)	Price		Reported Transactio (Instr. 3 an					
	n Stock, par Common St	value \$0.0001 p ock") <sup>(5)</sup>	er	10/15/202	21					S		1	.00,000	D	\$1.69	<b>9</b> (3)	4,012,9	39(4)	I		See Foot	note <sup>(1)(2)</sup>
Commor	Stock																50,04	7 <sup>(4)</sup>	D	)		
Commor	Stock <sup>(6)</sup>																104,08	3 <sup>(4)</sup>	I		See Foot	note <sup>(1)(2)</sup>
Commor	Stock <sup>(7)</sup>																5,712,1	23(4)	I		See Foot	note <sup>(1)(2)</sup>
Commor	1 Stock <sup>(8)</sup>																960,63	33 <sup>(4)</sup>	I		See Foot	note <sup>(1)(2)</sup>
Commor	1 Stock <sup>(9)</sup>																15,50	0(4)	I		See Foot	note <sup>(1)(2)</sup>
		Tal	ble	II - Derivati									osed of, onvertil					d			<u> </u>	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date,	4. Tran	isacti e (Ins	ion	5. Nu of Deriv	umbe vative urities uired or osed o) r. 3, 4	er 6. D Exp (Mo		kerc n Da	isable and	7. Tit Amo Secu Unde	le and unt of rities erlying rative rity (Ins		8. Price of Derivative Security (Instr. 5)	9. Num derivat Securi Benefi Owned Follow Report Transa (Instr.	tive ties cially I ing ted action(s)	10. Owne Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Cod	e V	,	(A)	(D)	Dat Exe	e ercisab	ole	Expiration Date	Title	Amou or Numb of Share	er						
	nd Address o	f Reporting Person*																				
(Last) 8550 W SUITE 1		(First) RT INN ROAD,		(Middle)																		
(Street)	CGAS,	NV		89117																		
(City)		(State)		(Zip)																		
	nd Address o	f Reporting Person <sup>*</sup>																				

(Street)		
LAS VEGAS	NV	89117
(City)	(State)	(Zip)
1. Name and Addres Adesi 234 LL	s of Reporting Person*	
(Last) 8550 WEST DES SUITE 102-452	(First) SERT INN ROAD,	(Middle)
(Street) LAS VEGAS	NV	89117
(City)	(State)	(Zip)
1. Name and Addres	s of Reporting Person <sup>*</sup>	
(Last) 8550 WEST DES SUITE 102-452	(First) SERT INN ROAD,	(Middle)
(Street) LAS VEGAS	NV	89117
(City)	(State)	(Zip)
(Last) 8550 WEST DES SUITE 102-452	(First) SERT INN ROAD,	(Middle)
(Street) LAS VEGAS	NV	89117
(City)	(State)	(Zip)
1. Name and Addres HOV Services (Last)	s of Reporting Person* s Ltd  (First)	(Zip)
1. Name and Addres HOV Service (Last) 8550 WEST DES SUITE 102-452	s of Reporting Person* s Ltd	
1. Name and Addres HOV Service (Last) 8550 WEST DES SUITE 102-452	s of Reporting Person* s Ltd  (First)  SERT INN ROAD,	
1. Name and Addres HOV Service (Last) 8550 WEST DES SUITE 102-452 (Street)	s of Reporting Person* s Ltd  (First)  SERT INN ROAD,	(Middle)
1. Name and Addres HOV Services (Last) 8550 WEST DES SUITE 102-452 (Street) LAS VEGAS (City)	s of Reporting Person*  S Ltd  (First)  SERT INN ROAD,  NV  (State)	(Middle) 89117
1. Name and Addres HOV Services (Last) 8550 WEST DES SUITE 102-452 (Street) LAS VEGAS (City) 1. Name and Addres HandsOn Fun (Last)	s of Reporting Person*  S Ltd  (First)  SERT INN ROAD,  NV  (State)	(Middle) 89117
1. Name and Addres  HOV Services (Last) 8550 WEST DES SUITE 102-452 (Street) LAS VEGAS (City) 1. Name and Addres HandsOn Fun (Last) 8550 WEST DES	s of Reporting Person* s Ltd  (First)  SERT INN ROAD,  NV  (State) s of Reporting Person* d 4 I, LLC  (First)  SERT INN ROAD,	(Middle)  89117 (Zip)
1. Name and Addres HOV Services (Last) 8550 WEST DES SUITE 102-452 (Street) LAS VEGAS (City) 1. Name and Addres HandsOn Fun (Last) 8550 WEST DES SUITE 102-452 (Street)	s of Reporting Person* s Ltd  (First)  SERT INN ROAD,  NV  (State) s of Reporting Person* d 4 I, LLC  (First)  SERT INN ROAD,	(Middle)  89117 (Zip)  (Middle)
1. Name and Addres HOV Services (Last) 8550 WEST DES SUITE 102-452 (Street) LAS VEGAS (City) 1. Name and Addres HandsOn Fun (Last) 8550 WEST DES SUITE 102-452 (Street) LAS VEGAS (City) 1. Name and Addres	s of Reporting Person* s Ltd  (First)  SERT INN ROAD,  NV  (State) s of Reporting Person* d 4 I, LLC  (First)  SERT INN ROAD,	(Middle)  89117 (Zip)  (Middle)  89117 (Zip)

8550 WEST DES SUITE 102-452	SERT INN ROA	aD,
(Street)	NV	89117
LAS VEGAS	14.4	03117
(City)	(State)	(Zip)
1. Name and Addres  HandsOn 3, L		son*
(Last)	(First)	(Middle)
8550 WEST DES	SERT INN ROA	AD,
SUITE 102-452		
(Street)		
LAS VEGAS	NV	89117
(City)	(State)	(Zip)

#### **Explanation of Responses:**

- 1. HOVS LLC, a Delaware limited liability company ("HOVS"), HandsOn Fund 4 I, LLC, a Nevada limited liability company ("HOF 4"), and HOV Capital III, LLC, a Nevada limited liability company ("HOV 3") each directly own shares of Exela Technologies, Inc. (the "Issuer"). HOVS is a wholly-owned subsidiary of HOV Services Ltd., an Indian limited company ("HOV Services" and together with HandsOn Global Management, LLC, a Delaware limited liability company ("HGM"), HOVS, HOF 2 LLC, a Nevada limited liability company ("HOF 2"), HOF 4, HOV 3, and Adesi 234 LLC, a Nevada limited liability company ("Adesi"), the "HGM Group")). Adesi and HOF 2 LLC together own a majority of HOF 4. Adesi and HOF 2, own a majority of the equity interests of HOV 3.
- 2. Mr. Par Chadha may be deemed to control HandsOn 3, LLC, a Nevada limited liability company ("HOF 3") and the HGM Group. The parties identified above and HGM may be deemed to beneficially own any shares of the Issuer owned by the entities in which they are beneficial owners. Each member of the HGM Group disclaims beneficial ownership of any shares of the Issuer owned by any other member of the HGM Group, except to the extent of its pecuniary interest therein. Solely for purposes of Section 16 of the Exchange Act, the HGM Group may be deemed to be directors-by-deputization by virtue of the HGM Group's contractual right to designate directors to the board of directors of the Issuer. For purposes of the exemption under Rule 16b-3 promulgated under the Securities Exchange Act of 1934, as amended.
- 3. On October 15, 2021, pursuant to a plan of disposition adopted by HOF 2 on March 26, 2021, in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934 (the "10b5-1 Plan"), HOF 2 sold 100,000 shares. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote (2) to this Form 4.
- 4. The number of shares reported in this Form 4 account for the one-for-three Reverse Stock Split effected by the Issuer on January 25, 2021.
- 5. Shares directly owned by HOF 2.
- 6. Shares directly owned by HGM.
- 7. Shares directly owned by HOVS.
- 8. Shares directly owned by Adesi.
- 9. Shares directly owned by HOF 3.

<u>/s/ Par Chadha</u> <u>09/15/2021</u>

\*\* Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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.

### Joint Filers' Names and Addresses

- 1. HOV Capital III LLC
- 2. Adesi 234 LLC
- 3. HOF 2 LLC
- 4. HOVS LLC
- 5. HOV Services Ltd
- 6. HandsOn Fund 4 I LLC
- 7. HandsOn Global Management, LLC
- 8. HandsOn 3, LLC

The business address for each of the above reporting persons is:

8550 West Desert Inn Road, Suite 102-452 Las Vegas, NV 89117

### JOINT FILERS' SIGNATURES

### HOV CAPITAL III LLC

By: /s/ Par Chadha
Name: Par Chadha
Title: Manager

### **ADESI 234 LLC**

By: /s/ Par Chadha
Name: Par Chadha
Title: Manager

### **HOF 2 LLC**

By: /s/ Par Chadha
Name: Par Chadha
Title: Manager

### **HOVS LLC**

By: /s/ James Reynolds
Name: James Reynolds
Title: Manager

## HOV SERVICES LTD

By: /s/ Vik Negi
Name: Vik Negi
Title: Director

### HANDSON FUND 4 I LLC

By: /s/ Par Chadha
Name: Par Chadha
Title: Manager

# HANDSON GLOBAL MANAGEMENT, LLC

By: /s/ Par Chadha
Name: Par Chadha
Title: Manager

# **HANDSON 3, LLC**

By: /s/ Par Chadha
Name: Par Chadha
Title: Manager