UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934

WNS Holdings Ltd.
(Name of Issuer)
American Depository Shares
(Title of Class of Securities)
92932M101*
(CUSIP Number)
December 31, 2022
(Date of Event which Requires Filing of this Statement)
Check the appropriate box to designate the rule pursuant to which this Schedule is filed: [X] Rule 13d-1(b) Rule 13d-1(c) Rule 13d-1(d) *This CUSIP number applies to the American Depositary Receipts, which evidence the American Depositary Shares.
The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page. The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

1. NAMES OF REPORTING PERSONS LR.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY) Grandeur Peak Global Advisors, LL.C 90-0732232 2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) (a) □ (b) □ 3. SEC USE ONLY 4. CITIZENSHIP OR PLACE OF ORGANIZATION Utah 5. SOLE VOTING POWER 1.243,486 6. SHARED VOTING POWER 1.243,486 8. SHARED VOTING POWER 1.243,486 8. SHARED DISPOSITIVE POWER 1.243,486 8. SHARED DISPOSITIVE POWER 1.243,486 10. CHECK IF THE AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 1.1 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 2.58% 12. TYPE OF REPORTING PERSON (see instructions) 1A				
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		2.58%		
IA	12.	TYPE OF REPORTING PERSON (see instructions)		
		IA		
		IA		

Item 1.

(a) Name of Issuer

WNS Holdings Ltd.

(b) Address of Issuer's Principal Executive Offices
Godrej & Boyce Complex, Plant No 10/11, Gate No 4, Vikhroli West, Maharashtra, IN, 400 079, IN

Item 2.

(a) Name of Person Filing

Grandeur Peak Global Advisors, LLC

(b) Address of the Principal Office or, if none, residence
 136 South Main Street, Suite 720
 Salt Lake City, UT 84101

(c) Citizenship

Not Applicable

(d) Title of Class of Securities

ADR

(e) CUSIP Number

92932M101

Item 3. If this statement is filed pursuant to §§240.13d-1(b) or 240.13d-2(b) or (c), check whether the person filing is a:

(e) [X] An investment adviser in accordance with §240.13d-1(b)(1)(ii)(E);

Item 4. Ownership.

Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

- (a) Amount beneficially owned: 1,243,486
- (b) Percent of class: 2.58%
- (c) Number of shares as to which the person has:
 - (i) Sole power to vote or to direct the vote 1,243,486
 - (ii) Shared power to vote or to direct the vote -0-
 - (iii) Sole power to dispose or to direct the disposition of 1,243,486
 - (iv) Shared power to dispose or to direct the disposition of -0-

Item 5. Ownership of Five Percent or Less of a Class.

Not Applicable.

Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not Applicable.

Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company.

Not Applicable.

Item 8. Identification and Classification of Members of the Group.

Not Applicable.

Item 9. Notice of Dissolution of Group.

Not Applicable.

Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

2/13/2023
Date
/s/ Amy Hone
Signature

Amy Hone / Deputy CCO
Name/Title