Instruction 1(b).

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 CHANGES I | N 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

| 1. Name and Address of Reporting Person* DAVIS JEFFREY S | | | | | | 2. Issuer Name and Ticker or Trading Symbol PERFICIENT INC [PRFT] | | | | | | | | eck all applic Directo | 10% 0 | | | | |
|---|---|--|--|---|---|---|-----------------------------------|--------|--|--|--|---|--|---|--|------------------------------|-----------|---|--|
| | Last) (First) (Middle) 22 EMERSON ROAD 3UITE 400 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/12/2006 | | | | | | | 2 | X Officer (give title Other (specify below) COO | | | | | |
| (Street) ST. LOU | IIS M | 10 | 63141 | | _ 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line |) K Form fi Form fi | vidual or Joint/Group Filing (Check Applic Form filed by One Reporting Person Form filed by More than One Reportin Person | | | | |
| (City) | (S | | (Zip) | n Davi | | 6 | | 4: 4- | | D:- | | 4 au Dai | 4: . : . !! | 0 | | | | | |
| 1. Title of Security (Instr. 3) | | 2. Trans | ransaction 2. e E nth/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. | | es Acquired (A) or Of (D) (Instr. 3, 4 and 5) | | 5. Amou Securitie Beneficie Owned F | 5. Amount of Securities Beneficially Owned Following | | rect I irect I 4) (| 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transact (Instr. 3 | tion(s) | | | Instr. 4) | | |
| Common Stock | | | 01/12 | 2/2006 | | | | A | | 45,000 | A | \$0.5 | 171 | ,209 | D | | | | |
| Common Stock | | | 01/13 | 3/200 | /2006 | | | | | 35,000 | A | \$1.15 | 206 | 5,209 | D | | | | |
| Common Stock | | | 01/13 | 3/200 | 2006 | | S | | 35,000(2 | D \$9.9671 | | 171 | 171,209 | | | | | | |
| | | | Table II | | | | | | | | osed of, convertib | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Exercise (Month/Day/Year) ice of erivative | | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | ı of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | Ow For Ily Dir or I | nership | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | ble | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Stock Option | \$0.5 | 01/12/2006 | | | M | | | 45,000 | 02/13/200 |)4 ⁽¹⁾ | 02/13/2013 | Common Stock | 45,000 | \$0.5 | 466,49 | 99 | D | | |
| Stock | \$1.15 | 01/13/2006 | | | M | | | 35,000 | 07/01/200 |)3 ⁽¹⁾ | 06/25/2012 | Common | 35,000 | \$1.15 | 431,49 | 99 | D | | |

Explanation of Responses:

Option

- 1. 1/3 of the option grant is exercisable on Date Exercisable in the table above and the remainder is exercisable ratably over the subsequent 8 quarters.
- $2. \ Shares \ sold\ pursuant\ to\ Rule\ 10b5-1\ Trading\ Plan,\ adopted\ by\ the\ reporting\ person\ on\ December\ 7,\ 2005.$

Jeffrey S. Davis

Stock

01/17/2006

** 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.