FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-									
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	Check this box if no longer subject
$\Box$	to Section 16. Form 4 or Form 5
$\cup$	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

					or sec	Juon 3	o(II) C	n the i	nvesinei	ii Co	mpany Act o	л 192	+0							
Name and Address of Reporting Person*     DAVIS JEFFREY S					2. Issuer Name <b>and</b> Ticker or Trading Symbol PERFICIENT INC [ PRFT ]									(CI	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DIVIOUEITRE I O															X Direc			10% O	- 1	
(Last)	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 07/19/2023									1	X Office below	,		Other (sbelow)	specify	
555 MARYVILLE UNIVERSITY DR				07/13/2023										Chairman and CEO						
SUITE 500					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															X Form	filed by On	e Rep	oorting Pers	son	
ST LOU	IS MO	О 6	3141													Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)		Rule	e 10	)b5-	1(c)	Trans	sac	tion Ind	ica	tion							
						heck t	his box he affir	to indi	icate that a defense o	a trans onditi	saction was n ons of Rule 1	nade   .0b5-1	pursuaı L(c). Se	nt to a o e Instri	contract, inst uction 10.	truction or wr	itten p	lan that is int	ended to	
		Table	I - No	n-Deriva	tive S	ecui	ities	Acc	uired,	Dis	posed of	, or	Ben	efici	ally Owr	ned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (ADisposed Of (D) (Instr. 3) 5)						nd Securi Benefi Owned Follow	cially d ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount (A)		A) or D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 07/19/20					023			G		216,000 <sup>(1)</sup> I		D	\$0	23	230,085		D			
Common Stock													3	3,941		I	By 401(k) plan			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Security Or Exercise (Month/Day/Year) if				eemed Ition Date, h/Day/Year)	4. Transaction Code (Instr. 8)				6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		d 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Nun of							

## Explanation of Responses:

1. On July 19, 2023 and in connection with certain estate planning activities, the reporting person caused the transfer of the shares reported herein to JSD Family Investment Group, L.P., a Missouri limited partnership ("JSD"), of which an estate planning trust is a limited partner. In accordance with the applicable governing documents of JSD, the reporting person does not have investment control over JSD and the transferred shares.

## Remarks:

**Jeffrey Davis** 

07/21/2023

\*\* 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.