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PERFICIEN Form 4 August 30, 2	2006							PROVAL	
FORM	A UNITED STAT	ES SECURITIES	S AND EX	CHA	NGE C	OMMISSION	OMB		
Check tl	his hox	Washingto	on, D.C. 2	0549			Number:	3235-0287	
if no lon	iger STATEMENT	OF CHANCES I	CHANGES IN BENEFICIAL OWNERSHIP OF						
subject t Section Form 4	16.		URITIES	T CI		LENSHIF OF	Estimated a burden hour response	urs per	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type	Responses)								
JOHNSEN KENNETH R Symbol			and Ticker o		ing	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)					(Check all applicable)			
	E HIGHWAY 121	(Month/Day/Year)_X_ DirectorIIGHWAY 12108/28/2006Officer (give below)				e title 10% Owner Other (specify below)			
	(Street)	4. If Amendment,	-	al		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
LEWIOVI	LE TV 750/7	Filed(Month/Day/	Year)						
LEWISVII	LLE, TX 75067					Person			
(City)	(State) (Zip)	Table I - No	on-Derivative	e Secu	rities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any	tion Date, if Transa Code h/Day/Year) (Instr.		(A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common		Code	V Amount	(D)	Price	(msu: 5 und 1)			
Stock	08/28/2006	М	5,000	А	\$ 3.17	5,000	D		
Common Stock	08/28/2006	М	2,000	А	\$ 3.17	7,000	D		
Common Stock	08/28/2006	S	5,000	D	\$ 12.856	2,000	D		
Common Stock	08/28/2006	S	2,000	D	\$ 12.5	0	D		
Common Stock	08/29/2006	М	3,000	А	\$ 3.17	3,000	D		

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Common Stock 08/29/2006 S 3,000 D ^{\$}_{13.375} 0 D

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owne	ed
(e.g., puts, calls, warrants, options, convertible securities)	

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am or Nur of S
Stock Option	\$ 3.17	07/29/2004		А	15,000		07/29/2005(1)	07/29/2014	Common Stock	15
Stock Option	\$ 3.17	07/29/2004		А	5,000		07/29/2004	07/29/2014	Common Stock	5,
Stock Option	\$ 3.17	07/29/2004		А	5,000		07/29/2004	07/29/2014	Common Stock	5,
Stock Option	\$ 9.19	12/14/2005		А	10,000		12/14/2005	12/14/2015	Common Stock	10
Stock Option	\$ 3.17	08/28/2006		М		5,000	07/29/2004	07/29/2014	Common Stock	5,
Stock Option	\$ 3.17	08/28/2006		М		2,000	07/29/2004	07/29/2014	Common Stock	2,
Stock Option	\$ 3.17	08/29/2006		М		3,000	07/29/2004	07/29/2014	Common Stock	3,

Reporting Owners

Reporting Owner Name / Address

.

Relationships

10% Owner Officer Other

JOHNSEN KENNETH R 700 STATE HIGHWAY 121 BYPASS SUITE 200 LEWISVILLE, TX 75067

Х

Director

Signatures

/s/ Kenneth R. Johnsen

08/30/2006

Signature of
Reporting Person

Date

Explanation of Responses:

* 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).

(1) 1/3 of option grant is exercisable on first anniversary of grant and the remainder is exercisable ratably over the subsequent eight quarters.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.