FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFICIAL | OWNERSHIP |
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| 1 | OMB APPRO | VAL |
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| | Check this box if no longer subject to |
|---|--|
| ٦ | Section 16. Form 4 or Form 5 obligations may continue. See |
| J | obligations may continue. See |
| | Instruction 1(b). |

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* BEATSON DAVID I | | | | | 2. Issuer Name and Ticker or Trading Symbol PFSWEB INC [PFSW] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|---|--|--|---|---|---|----------|-------------------------------------|--|----------|--|-----------------|-----------------------------------|---|---|---|--|--|-----|--|
| | | | | | | | | | | | | | | X | Directo | r | | 10% Ow | ner | |
| (Last) (First) (Middle) C/O PFSWEB, 500 N. CENTRAL EXPRESSWAY | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/04/2010 | | | | | | | | \exists | | Officer below) | (give title | | Other (s below) | pecify | | |
| SUITE 500 | | | | L | | | | | | | | | - | C. Individual or Jaint/Oracin Filips (Charle A ! ! - | | | | | | |
| | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | - | 55054 | | | | | | | | | | | X | Form fi | ed by One | Report | ting Person | | |
| PLANO | T | ` | 75074 | | | | | | | | | | | | Form fi Person | led by More | than C | One Report | ing | |
| (City) | (St | ate) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non- | -Deriva | tive | Sec | curities | Aco | quired, C | Disp | osed o | f, or Be | nefic | ially | Owned | | | | | |
| Date | | | 2. Transac Date (Month/Da | Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disp Code (Instr. 5) | | Disposed | rities Acquired (A ed Of (D) (Instr. 3, | | or and | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) oi (D) | Pric | се | | nsaction(s) etr. 3 and 4) | | | Instr. 4) | | |
| | | ٦ | Γable II - D (ε | | | | | | uired, Dis | | | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/\ | Date, Trans | | nsaction of Deriva Secur Acqui (A) or Dispo of (D) 3, 4 au | | ve es d ed nstr. | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 1 | erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | y C | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | Co | ode | v | (A) | (D) | Date Exercisable | | expiration Date | Title | Amou or Numl of Share | per | | | | | | |
| Option to purchase ⁽¹⁾ | \$3.43 | 06/04/2010 | 06/04/201 | 10 / | A | v | 10,000 | | 06/04/2011 | 0 | 6/03/2020 | Common Stock | 10,0 | 00 | (2) | 10,000 | | D | | |

Explanation of Responses:

- 1. Option to purchase issued under Non-Employee Director Plan
- 2. Not applicable

Remarks:

David I. Beatson

06/09/2010

** 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.