FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number 3235-0287 Estimated average burden hours per response 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 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(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person [*] HEINRICHS R STEPHEN | | | | | 2. Issuer Name and Ticker or Trading Symbol PDF SOLUTIONS INC [PDFS] 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2014 | | | | | | | | check all ap | ship of Reporting Per applicable) irector fficer (give title elow) | | () | to Issuer 6 Owner | |
|--|--|---------------|------|---|--|---|--|---|---|---|---------------|--|--|--|--|---------------------------|---|--|
| (Last) (First) (Middle) | | | | | | | | | | | | | Other (specify below) | | | | | |
| 333 W. SAN CARLOS ST. SUITE 1000 | | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) SAN JOSE CA 9511 | | | 5110 |) | | | | | | | | | | n filed by | | an One F | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Year | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, and 5) | | | 5. Amour Securitie Beneficia Owned Followin | s ally | | Direct ct (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (| | (| |
| Common Stock | | | | 06/01/2014 | | | | A ⁽¹⁾ | | 6,188 | A | \$ <mark>0</mark> | 13,5 | 13,562 | | D | | |
| Common Stock | | | | | | | | | | | | | 13,3 | 313 | | I | Fairview Financial Corporation | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Ex Security or Exercise (Month/Day/Year) if | | Exec if an | | | isaction e (Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 | 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. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownersh Form: Direct (D or Indire (I) (Instr. 4) | Beneficial) Ownership | | |

Explanation of Responses:

1. These shares represent an award of restricted stock units granted under the Company's Director Compensation Program. 25% of the Total Shares vested on June 1, 2014 and 25% of the Total Shares of the shall vest annually thereafter until fully vested, provided that the reporting person continues to serve as a Director on the Board of Directors.

Date

Exercisable Date

Expiration

and 5)

/s/ Gregory Walker, Attorneyin-Fact for R. Stephen 06/02/2014 Heinrichs

** Signature of Reporting Person Date

Amount or Number

of Shares

Title

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).

Code

v (A) (D)

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.