FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	DС	20549
rvasiliigion,	D.C.	20040

STATEMENT	OF CHA	NGES IN	BENEFICIAL	OWNERSHIP
SIAILMENI	OF CITA	INGES III	BENEFICIAL	CAMINE VOLUME

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 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

Name and Address of Reporting Person*     Longiti Marco.					2. Issuer Name and Ticker or Trading Symbol PDF SOLUTIONS INC [ PDFS ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Iansiti Marco											1				X Direc	tor		10% O	wner
(Last) 2858 DE	(Fir	st) (M	Middle)			5. Date of Earliest Transaction (Month/Day/Year) 07/01/2022						_	Office below	er (give title v)		Other (: below)	specify		
(Street) SANTA CLARA	CA	Λ 9	5050		4. If A							Line	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting				on		
(City)	(Sta	ate) (Z	Zip)											Perso		ic tilai	TOTIC REP	orung	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			Execution Date,				es Acquired (A) Of (D) (Instr. 3,			d Securit Benefi	ities Folicially (D) d Following (I)		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount (A		or	Price	Transa	ction(s) 3 and 4)			(Instr. 4)		
Common Stock 07/01				07/01/	2022				<b>A</b> <sup>(1)</sup>		7,212(1)	7,212 <sup>(1)</sup> A		(1)	(1) 39,465		D		
		Tal									osed of, onvertib					d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		4. Transa Code ( 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins: 3 and 4)		ıstr.	8. Price of Derivative Security (Instr. 5)		y Direc or Inc (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code			Date Exercis	able	Expiration Date	Title	or Num of Shar	ber						

## **Explanation of Responses:**

1. These shares represent an award of Restricted Stock Units (Total RSU) under the Company's Director Compensation P rogram. 1/12th of the Total RSU shall vest on the grant effective date and 1/12th of the Total RSU shall vest monthly thereafter until fully vested, subject to the Recipient's continued service through each applicable vesting date.

/s/ Kimon Michaels, Attorney-07/05/2022 in-Fact for Marco Iansiti

\*\* 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.