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 [*] MICHAELS KIMON | | | | | | 2. Issuer Name and Ticker or Trading Symbol PDF SOLUTIONS INC [PDFS] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
|--|---|--|---------------------------|----------------------|----------------------------------|--|---|-----|--------------|---|-------|----------------|---------------------------------------|----------------|------------------|--|--------------------------|---|-------------------|--|--|--|
| (Last) | `` | irst) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/27/2011 | | | | | | | | | X Of be | ficer (low) | er (give title w) | | Other (below) | specify | | |
| 333 W. SAN CARLOS ST. SUITE 700 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. | VP of Products and Solutions 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | | | | | | | | | | | Lir | , | rm file | ed bv One | Rer | porting Pers | on | |
| SAN JO | SAN JOSE CA 95110 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | Zip) | | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - N | on-Deriv | ative \$ | Sec | curitie | s A | cqui | ired, D | isp | osed | of, or | Bene | eficia | lly Ow | ned | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/Date) | | | | | | Exe if a | A. Deemed xecution Date, any Ionth/Day/Year) | | а, Т С | Transaction Disp Code (Instr. and | | | curities Acquired (D) (Instr.) | | | | | ties F cially (| | ownership m: Direct or irect (I) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | c | Code | v | Amoun | | A) or D) | Price | Report Transa | | | | .tr. 4) | (Instr. 4) | | |
| Restricted Stock Unit 05/27/2 | | | | | 2011 | 011 | | | | Α | | 2,50 | 500 A | | \$(| | 87,312 | | | Ι | By Spouse | |
| Common Stock | | | | | | | | | | | | | | | | | 1,471,674 | | | D | | |
| | | T | able II | - Deriva (e.g., p | | | | | | | | | | | | y Owne | ed | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | | 4. Transact Code (In 8) | | on Number | | Expi | 6. Date Exercisabl Expiration Date (Month/Day/Year) | | | Amount | | tr. 3 | 8. Price of Derivati Security (Instr. 5 | ve S B O F R | 9. Number o derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exer | e rcisable | Ex | piration te | Title | or Nu of | ımber | | | | | | | |
| 2001 Stock Plan Option (right to buy) | \$6.21 | 05/27/2011 | | | A | | 7,500 | | 06/27 | 7/2011 ⁽¹⁾ | 05/ | /27/2021 | Commo Stock | | ,500 | \$0 | | 7,500 | | Ι | By Spouse | |

Explanation of Responses:

1. 1/48th of the total number of shares will vest on June 27, 2011 and 1/48th of the total shares will vest on the 27th of each month, provided that the reporting person's continued service with PDF Solutions, Inc.

| /s/ Joy E. Leo, A | Attorney-in- |
|-------------------|--------------|
| Fact for Kimon | W. Michaels |

06/01/2011

** 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.