FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL
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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

Name and Address of Reporting Person* CASSIN BJ			2. Issuer Name and T PDF SOLUTIO					Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) 3000 SAND HII	(First)	(Middle	e)	3. Date of Earliest Tra 02/17/2004					belo	cer (give tit	tle Oth bel	below)		
BUILDING 3, SUITE 210				4. If Amendment, Date	e of Origii	nal Fil	ed (Month/Da		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) MENLO PARK	CA	9402	5-7119							Forn Pers		More than One	Reporting	
(City)	(State)	(Zip)	N D : (. 5:								
1. Title of Security	e of Security (Instr. 3) 2. Tran		2. Transaction	2A. Deemed Execution Date,	3. Transaction Code (Instr. 8)		sposed of, or Benef 4. Securities Acquired (A Disposed Of (D) (Instr. 3, and 5)		ed (A) or	5. Amor Securiti Benefic Owned	unt of ies ially	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) or (D)	Price	Followi Reporte Transac (Instr. 3	ed ction(s)	(Instr. 4)	(Instr. 4)	
Common Stock			02/17/2004		S		200	D	\$12.4	15 398	3,718	I	By the Cassin Family Trust U/T/D 1/31/96	
Common Stock			02/17/2004		S		300	D	\$12.4	398	3,418	I	By the Cassin Family Trust U/T/D 1/31/96	
Common Stock			02/17/2004		S		400	D	\$12.4	398	3,018	I	By the Cassin Family Trust U/T/D 1/31/96	
Common Stock			02/17/2004		S		200	D	\$12.4	397	7,818	I	By the Cassin Family Trust U/T/D 1/31/96	
Common Stock			02/17/2004		S		500	D	\$12.4	397	7,318	I	By the Cassin Family Trust U/T/D 1/31/96	
Common Stock			02/17/2004		S		3,400	D	\$12.2	28 393	3,918	I	By the Cassin Family Trust U/T/D 1/31/96	
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			e I - Non-Deriv	_					וט ,ו	_			-				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/	Year)	2A. Deen Executio if any (Month/E	tion Dat	te,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amor Securiti Benefic Owned	es ially	6. Own Form: (D) or Indired	Direct	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount (A) or (D)		Price	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	,	(Instr. 4)	
Common	Stock		02/17/20	004				S		1,000	D	\$12.23	3 392	2,918]	I	By the Cassin Family Trust U/T/D 1/31/96
Common	Stock		02/17/20	004				S		2,000	D	\$12.23	390),918	1	I	By the Cassin Family Trust U/T/D 1/31/96
Common	Stock		02/17/20	004				S		8,000	D	\$12.2	382	2,918	1	I	By the Cassin Family Trust U/T/D 1/31/96
Common Stock												41	,666		I	By Cassir Family Partners, a California Limited Partnersh	
		Та	ble II - Deriva							osed of, convertib			/ Owned	I			
Derivative Conversion Date Security or Exercise (Month/Day/Year)		3A. Deemed Execution Date, if any	Deemed 4. Transaction		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration I (Month/Day)		cisable and Date	7. Title Amount Securiti Underly Derivati Security 3 and 4	and t of es ving ve y (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	es Fally Congress (I) In the congress of the congress (I) In the congress of the congress of the congress (I) In the congress of the congress	O. Dwnership Form: Direct (D) or Indirec I) (Instr.	Beneficia Ownershi	
				Code	v	(A)	(D)	Date Exerci:	sable	Expiration Date		Amount or Number of Shares					

Explanation of Responses:

Remarks:

/s/ P. Steven Melman, Attorney-in-Fact for B. J.

02/17/2004

Cassin

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).