FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
vasiliigton,	D.C.	20040	

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

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

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*     Strojwas Andrzej					2. Issuer Name and Ticker or Trading Symbol PDF SOLUTIONS INC [ PDFS ]									5. Ri (Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) 2858 DE	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2024								Į.		Officer (give title below)		er (specify w)	
(Street) SANTA CLARA	CA	Δ 9	5050		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	ndividual or Joint/Group Filing (Check Applicable e)  Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	on-Deriva	tive S	Secu	rities	Acc	quired	l, Dis	posed of	, or E	3ene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution (Year) if any		eemed Ition Date, h/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed O 5)						5. Amo Securi Benefi Owned Report	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect t Beneficial Ownership		
					Code	v	Amount	(A) (D)	(A) or (D) Price		Transa	ction(s) 3 and 4)		(Instr. 4)					
Common Stock 07/01/2					)24			<b>A</b> <sup>(1)</sup>		10,000(1)	A	1	(1)	102,280		D			
Common Stock 07/01/20					024			F		2,680(2)	D	(2)	\$35.74	4 9:	9,600	D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execunth/Day/Year) if any	eemed ition Date, h/Day/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D' (Instrand &	rities lired r osed ) 1. 3, 4	6. Date Expira (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	Derivative decurity decurity destr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership oct (Instr. 4)	
					Code				Date Exerci	sable	Expiration Date	Title	or Num of Shar	ber					

## **Explanation of Responses:**

- 1. These shares represent an award of restricted stock units (Total Shares). 12.5% of the Total Shares shall vest on the date that is six (6) month after the Vesting Start Date and 12.5% of the Total Shares shall vest on each date that is six (6) months thereafter until fully vested, subject to the recipient's continued service through each applicable vesting date.
- 2. This represents a disposition of shares to the Company to satisfy tax withholding obligations with respect to the vesting of restricted stock units. This is not a sale of shares in the market.

/s/ Adnan Raza, Attorney-in-Fact for Andrzej Strojwas

07/02/2024

\*\* 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.