FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | 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).

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* Yau Robert | | | | | 2. Issuer Name and Ticker or Trading Symbol GSI TECHNOLOGY INC GSIT | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|--------------------|---|----------------------|--|-----------------|------|--------------------------------------|--|--|--|---|--|-----------------|--|--|--|
| <u> Tau IXC</u> | <u>DUEIL</u> | | | | | | | | | | | X Directo | or | | 10% Ov | /ner | |
| (Last) (First) (Middle) | | | | 3. | Date of Earliest Transaction (Month/Day/Year) | | | | | | | X Officer below) | (give title | | Other (s below) | pecify | |
| GSI TECHNOLOGY, INC. | | | | | 08/11/2014 | | | | | | VP, | VP, Engin., Sect. & Director | | | | | |
| 1213 ELKO DRIVE | | | | | | | | | | | | | | | | | |
| 1210 LL | no Bravi | | | | If Ame | endment I | Date | of Original File | ed (Month/D | av/Year) | 6 11 | ndividual or | loint/Group | Filing | (Check An | nlicable | |
| (Street) | | | | _ ~ | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| SUNNYVALE CA | | 94089 | | | | | | | | | X Form f | iled by One | Repo | rting Perso | n | | |
| | | | | | | | | | | | | Form f Persor | iled by More | e than | One Repor | ting | |
| (City) | (5 | State) | (Zip) | | | | | | | | | | | | | | |
| | | Tak | ole I - Non-De | rivativ | e Se | curities | . Δc | auired Di | isnosed (| of or Re | neficial | v Owner | ı | | | | |
| | | | | | _ | | | | <u> </u> | - | | - | | | | 7. Nature | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da) | | | | | Execution Date | | | Code (Instr. 5) | | | tr. 3, 4 and | Benefici | es Form | Form: (D) or | ownership m: Direct or Indirect | of Indirect Beneficial Ownership | |
| | | | | | | (WOITHI/Day/Tea | | (i) 8) | | | | Reported | d | (1) (111 | | (Instr. 4) | |
| | | | | | | | | Code V | Amount | (A) or (D) | Price | Transaci (Instr. 3 | tion(s) and 4) | | | | |
| | | | Table II - Der | ivetive | Sooi | urition | Λ | uirod Dio | nocod of | or Bon | oficially | Owned | | | | | |
| | | | | | | | | s, options, | | | | Owneu | | | | | |
| 1. Title of | 2. | e (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. | | | | 6. Date Exercisable and 7. Title and | | | d Amount | 8. Price of | Price of 9. Numbe | | 10. | 11. Nature | |
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | | | Transa Code 8) | | | | Expiration Date (Month/Day/Year) | | of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | ly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Stock Option (right to buy) | \$5.23 | 08/11/2014 | | A | | 40,000 | | (1) | 08/11/2024 | Common Stock | 40,000 | \$0 | 40,000 | | D | | |

Explanation of Responses:

1. Subject to the Reporting Person's continued service to the Issuer, the option vests and becomes 100% exercisable on April 13, 2018.

Remarks:

/s/ Douglas Schirle, Attorneyin-Fact

08/12/2014

** 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.