SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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 Ac		•	2. Date of Event Requiring Statem (Month/Day/Year	nent	3. Issuer Name and Ticker or Trading Symbol PIXELWORKS, INC [PXLW]					
(Last) (First) (Middle) 8100 SW NYBERG RD. (Street) (Street) TUALATIN OR (City) (State) (Zip)		07/18/2007		4. Relationship of Reporting Per (Check all applicable) Director X Officer (give title	son(s) to Issu 10% Own Other (spe	er 6. Ir	 5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) 			
			_		A below) VP Finance, CFO &	below) Treasurer	I	X Form filed by One Reporting Person Form filed by More than One Reporting Person		
			Table I - Non	-Derivati	ve Securities Beneficiall	y Owned				
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) Grom: Direct (Instr. 5)		ct (D) (Instr. 5)			
					e Securities Beneficially nts, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)			2. Date Exerci Expiration Date (Month/Day/Ye	te	 3. Title and Amount of Secur Underlying Derivative Secur 4) 		4. Conversion or	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
				Expiration Date	n Title	Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

No securities are beneficially owned.

Steven L Moore

07/18/2007

** 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 5 (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.