FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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**OMB APPROVAL** OMB Number: 3235-0287 Estimated average burden

0.5

hours per response:

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* St Dennis Thomas						2. Issuer Name <b>and</b> Ticker or Trading Symbol FORMFACTOR INC [ FORM ]								Check	ionship of Reporting Person(s) to Issuer all applicable)  Director 10% Owner				
ot Dennis Thomas													X	Direct	or	10	% Ov	vner	
(Last) (First) (Middle) 7005 SOUTHFRONT ROAD					3. Date of Earliest Transaction (Month/Day/Year) 11/20/2019									Office below		Other (specify below)			
7005 500 THI ROLLI ROLL					4 15	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Ctroot)					4. "	Amend	ament,	Date	or Origi	IIIai File	eu (Monunda)	y/ rear)		ine)	uuai oi	John Group	Filling (Cried	k Aþl	Jiicable
(Street) LIVERM	ORE C.	۸	94551											X	Form	filed by One	Reporting F	erso	n
LIVEKIVI	JRE C.	A	94331													filed by More	e than One	Repoi	rting
(City)	(6	tate)	(Zip)												Perso	on			
(City)	(5		(Zip)																
		Tal	ole I - N	Non-Deriv	vative	Sec	uritie	s Ac	quire	ed, Di	isposed o	f, or B	enefici	ally (	)wne	d			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Execution Date,		,			Acquired (A) or (D) (Instr. 3, 4 and 5)		5)	Securi Benefi Owned	cially I Following	6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	ct	7. Nature of Indirect Beneficial Ownership			
								Ī	Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)
Common Stock 11/2			11/20/2	019	19		S		5,000	D	\$22.68	522.6829 <sup>(1)</sup>		46,000			The St. Dennis 1998 Trust		
			able II	- Deriva	tive S	ecur	ities	Acar	uired	. Disr	osed of.	or Ben	eficial	v Ov	ned				
	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	ercise (Month/Day/Yea of ative	if any	eemed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration I (Month/Day		Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative deri urity Sec r. 5) Ber Owi Foll Rep Trai	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	hip O) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. Price represents the weighted average sale price for the transaction reported. Price range of shares sold is \$22.68 through \$22.683. Reporting person undertakes to provide upon request by the SEC staff or a security holder of the Issuer, full information regarding the number of shares sold at each separate price.
- 2. The Shares are held of record by The St. Dennis 1998 Trust, for which the Reporting Person serves as co-Trustee, along with Sandra St. Dennis.

## Remarks:

By: /s/ Jason Cohen, Attorneyin-Fact For: Thomas St. Dennis

11/21/2019

\*\* 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.