FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFIC | IAL OWNERSHIP |
|------------------|------------|--------------|---------------|

| | OMB APPRO | OVAL | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|
| | 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* <u>KHANDROS IGOR Y</u> | | | | 2. Issuer Name and Ticker or Trading Symbol FORMFACTOR INC [FORM] | | | | | | | | | | | k all app | p of Reportin blicable) ctor | . , | o Issuer % Owner | |
|---|--|-----|--|--|----------------|---|----------|--------------------------|---|--------|---|--------------|--------------------|--|---|--|---|---------------------|--------------|
| (Last) 2140 RES | (F SEARCH I | * | (Middle) | | | of Earlies 2004 | st Trans | saction (Month/Day/Year) | | | | | | X | Offic below | , | | ner (specify ow) | |
| (Street) LIVERM (City) | | | 94550 (Zip) | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Indi Line) | ividual or Joint/Group Filing (Check Applicab Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tab | le I - No | n-Deriv | ative | Se | curitie | s Ac | quired, | Dis | posed o | f, c | or Be | enef | cially | Own | ed | | |
| Da | | | 2. Transaction Date (Month/Day/Year) | |) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction | | | | | | or 4 and | Secur Benef Owne | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect | |
| | | | | | | | | Code | v | Amount | | (A) c (D) | or P | ice | Reported Transaction(s) (Instr. 3 and 4) | | | (instr. 4) | |
| Common Stock ⁽¹⁾ | | | 06/21/ | /2004 | | | | S | | 5,000 | | D | \$ | 20.64 | 1,7 | 785,000 | I | by Spouse | |
| Common | Stock ⁽¹⁾ | | | 06/21/ | /2004 | | | | S | | 5,000 |) | D | \$ | 20.56 | 1,3 | 780,000 | I | by Spouse |
| Common Stock ⁽¹⁾ | | | 06/21/ | /2004 | | | | S | | 45,000 | | D | | \$20.5 | 1,735,000 | | I | by Spouse | |
| Common Stock ⁽²⁾ | | | | | | | | | | | | | 2,121,430 | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of 2. 3. Transaction Derivative Conversion Date Decurity or Exercise (Month/Day/Year) if any | | | | 4. Fransaction Code (Instr. 3) | | 5. Number 6 | | Expiration | 6. Date Exercis. Expiration Date (Month/Day/Yea | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Der Sed (Ins | Price of erivative ecurity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownersh Form: Direct (D or Indire (I) (Instr. | Beneficial) Ownership ct (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Tit | | Amou or Numb of Share: | er | | | | |

Explanation of Responses:

- 1. Pursuant to Rule 10b5-1 Plan
- 2. Includes shares that are subject to a lapsing right of repurchase at the initial purchase price of such shares in favor of the Issuer. These repurchase rights terminate according to a vesting schedule over a period of 4 years, which ends on July 5, 2004.

By: Fenwick & West LLP,

Attorney-in-Fact For: Igor Y. 06/22/2004

Khandros

** 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.