## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average t	ourden								

0.5

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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

								.,				July Act									
1. Name and Address of Reporting Person*  ROGAS EDWARD JR				2. Issuer Name and Ticker or Trading Symbol FORMFACTOR INC FORM										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
													X	Directo	or		10% Ov	vner			
(Last) (First) (Middle) 7005 SOUTHFRONT ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/22/2014											Officer below)	(give title		Other (s below)	specify		
, soo soo tiii korii koriis			1 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable							
(Street)					"	II AIIIC	mamer	it, Date	or Origin	iai i ii	icu (	WIOTIGI7D	ay/ icc	u )	Lir		dudi oi v	Johnsoroup	, i iii i	у (Спсск Ар	piicabic
LIVERN	ORE C	A	94551													X		•		orting Perso n One Repo	
(City)	(6	'total	(7in)		1												Persor		ie iliai	топе перо	rung
(City)	(8	State)	(Zip)																		
		Tab	le I - Noi	n-Deriv	ative	e Se	curiti	ies Ac	quire	d, Di	isp	osed o	of, or	Ber	neficia	lly (	Owned	i			
1. Title of Security (Instr. 3)  2. Trans Date (Month/			Day/Year)   E		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		Dispose	rities Acquired (A) ed Of (D) (Instr. 3, 4			4 and Securiti Benefic		es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Cod	le V		Amount		(A) or (D)	Price	Trancac		tion(s)			,iii3ti. <del>4</del> )
Common Stock 05/2			05/22	/2014			M			6,000	) <sup>(1)</sup> A		\$0	26,000			D				
		Т	able II -	Deriva (e.g., p												y Ov	wned				
Derivative   Conversion   [		3. Transaction Date (Month/Day/Year)	Execution Date, If any		4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable a Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	Code	v	(A)	(D)	Date Exercis	able	Ex <sub>I</sub>	oiration te	Title		Amount or Number of Shares						
Restricted Stock	\$0	05/22/2014			м			6,000	(2)			(3)	Comr	non	6.000		\$0	14 000		D	

## Explanation of Responses:

- 1. Represents vested shares of common stock issued pursuant to the conversion of 100% of the restricted stock units granted on May 22, 2013.
- 2. The Restricted Stock Units vested and became exercisable in 12 equal monthly installments. Vest dates began June 22, 2013 and ended May 22, 2014. Settlement of vested Units into common stock occurred on May 22, 2014.
- 3. The restricted stock units released were settled in shares of common stock and were immediately cancelled upon settlement.

## Remarks:

THE CONFIRMING STATEMENT GRANTING THE ATTORNEY-IN-FACT THE AUTHORITY TO EXECUTE AND FILE THIS FORM 4 HAS BEEN PREVIOUSLY FILED WITH THE U.S. SECURITIES AND EXCHANGE COMMISSION.

By: /s/ Stuart L Merkadeau,
Attorney-in-Fact For: Edward 05/27/2014
Rogas, Jr.

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.