FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

ı	OMB APPR	OVAL
	OMB Number:	3235-0287
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1	hours nor rosponso:	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* SLESSOR MIKE				2. Issuer Name and Ticker or Trading Symbol FORMFACTOR INC FORM									Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u> 5LE55</u>	OR MIK	<u>E</u>			-	<u> </u>		0101						X	Directo	r		10% Ow	/ner	
(Last) 7005 SO	(Fi	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/06/2015								X	Officer below)			Other (s below)	(specify	
(Street)  LIVERM  (City)			94551 (Zip)		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivi ne) X	Form fi	Joint/Group Filing (Check Applicable illed by One Reporting Person illed by More than One Reporting				
		Tab	le I - No	n-Deri	vativ	e Se	curit	ies Ac	quired	, Dis	sposed o	of, or Be	neficia	lly (	Owned					
1. Title of Security (Instr. 3) 2. Tran		2. Trans Date (Month/l		Execution Date,		Execution Date, f any				es Acquire Of (D) (Inst		and 5) Securition Benefici Owned I		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	saction(s) r. 3 and 4)			(Instr. 4)			
Common Stock 05/06			5/2015	2015		М		15,000(	(1) A	\$0.	0	195,292			D					
Common Stock 05/07/			7/2015	s 6,674 <sup>(2)</sup> D \$8.2831		188	188,618		D											
		-	Table II -								osed of, convertil			y Oı	wned			,	•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction ode (Instr.		n of		6. Date Exercis Expiration Dat (Month/Day/Ye		7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g Security	De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e C s s lly D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Coo	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares							
Restricted Stock Units	\$0.0	05/06/2015			M			15,000	(3)		(4)	Common Stock	15,000		\$0.0	71,665	5	D		

## **Explanation of Responses:**

- 1. Represents vested shares of common stock issued pursuant to the second conversion of the restricted stock units granted on May 6, 2013.
- 2. Represents vested shares of common stock sold to satisfy certain tax withholding obligations associated with the conversion of the restricted stock units.
- 3. The Restricted Stock Units vest and are exercisable in three annual installments on each May 6 of 2014, 2015, and 2016 (or the first market trading day during an open trading window under the Issuer's insider trading policy thereafter if the applicable vesting date is not on a market trading day during an open trading window).
- 4. The restricted stock units released were settled in shares of common stock and were immediately cancelled upon settlement.

## Remarks:

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

By: Stuart L Merkadeau For: Mike Slessor

05/08/2015

\*\* Signature of Reporting Person

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.