FORM 4

UNITED STATE

Washington, D.C. 20549

|--|

	APPROVAL
	er: 3235-0287
	verage burden
	sponse: 0.5
Ш	sponse.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

Name and Address of Reporting Person* Shahar Shai						2. Issuer Name and Ticker or Trading Symbol FORMFACTOR INC [FORM]							elationship eck all appli Directo	cable)		Owner
(Last) 7005 SO	,	First)		3. Date of Earliest Transaction (Month/Day/Year) 11/05/2024							Officer (give title below) CFO, SVP Global Finance					
(Street) LIVERMORE CA 94551 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)							dividual or Joint/Group Filing (Check Applicable) Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tal	le I - Non	-Deriv	ative Se	ecurities Ac	quirec	l, Dis	posed o	of, o	r Ben	eficiall	y Owne	t		
1. Title of Security (Instr. 3) 2. Transar Date (Month/Di				· · · · I	2A. Deemed Execution Date, if any (Month/Day/Year	Code	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				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	Reporte Transac (Instr. 3	tion(s)		(Instr. 4)
Common Stock 11/05/					5/2024		М	Т	1,116	5	A	\$0	39,086		D	
Common	Stock			11/05	5/2024		F		619(1	.)	D	\$39.2	3 38	,467	D	
						curities Acq ls, warrants							Owned		,	•
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date Execution Date (Month/Day/Year) if any (Month/Day/Day/Day/Learly (Month/Day/Day/Learly (Month/Day/Learly (Month/Day/L		Date, Transaction Code (Instr.		n of	6. Date Exercisable and Expiration Date (Month/Day/Year)			and 7. Title and Amount of Securities Underlying			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial	Ownersh Form:	Beneficia Ownershi	

Restricted 11/05/2024 \$0 Stock

Derivative

- **Explanation of Responses:** 1. Represents the number of shares withheld upon vesting of restricted stock units to cover tax withholding obligations.
- 2. The Restricted Stock Units granted on August 5, 2024 vest in twelve (12) quarterly installments beginning on November 5, 2024 and ending on August 5, 2027 and will be settled into shares of common stocks on or following the vesting dates.

Date

Expiration

3. If the reporting person's employment is terminated for any reason before an applicable Vesting Date, all restricted stock units that have not yet vested shall be forfeited without consideration, except as provided in the change of control severance agreement and any other agreements regarding equity vesting and exercisability between the reporting person and Issuer, which agreements or form agreements are filled with the SEC.

Remarks:

/s/: Stan Finkelstein, Attorneyin-fact for Shai Shahar

11/06/2024

(Instr. 4)

or Indirect (I) (Instr. 4)

D

** Signature of Reporting Person

Title

Stock

(Instr. 3 and 4)

Derivative Security

Amount Number

1.116

\$0

Date

Owned Following

Reported

Transaction(s) (Instr. 4)

12,276

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).

Code

M

Acquired (A) or Disposed

of (D) (Instr. 3, 4 and 5)

(A) (D)

1,116

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.