FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| 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).

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* BONANNO PHYLLIS O | | | | | 2. Issuer Name and Ticker or Trading Symbol MOHAWK INDUSTRIES INC [MHK] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|---|--|--|---|---------------------------|---|--|---|--|---------------|------------|--|---------------------------------------|---|---|--|--|---|
| (Last) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2005 | | | | | | | | er (give title v) | | (specify |
| 160 SOUTH INDUSTRIAL BLVD. P.O. BOX 12069 | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | | | | | | | | | | | | | X | X Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| CALHO | UN G | A 3 | 30703 | _ | | | | | | | | | | Perso | , | | J. J |
| (City) | (St | tate) (| Zip) | | | | | | | | | | | | | | |
| | | Tab | le I - Non-De | rivative | Sec | uritie | s A | cquired, D | ispo | sed o | of, or Be | enefic | ially | Owne | d | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) | | | | | Execution Date, | | | e, Transaction Dis Code (Instr. and | | | Securities Acquired (isposed Of (D) (Instr. and 5) | | | 5. Amo Securit Benefic Owned Follow | ties cially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | V | Amount | t (A) | or Pri | се | Report Transa | | , | (|
| | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Yea | 4. Transac Code (II | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerc Expiration D (Month/Day/ | ate | e Amount o | | of s ng e | of Deri Sec | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expir Date | ration | Title | Amour or Number of Shares | er | | | | |
| Non- Qualified Stock Option (right to buy) | \$81.4 | 01/01/2005 | | A | | 2,250 | | 01/01/2006 ⁽¹⁾ | 01/01 | 1/2015 | Common Stock | 2,250 |) | \$0 | 2,250 | D | |
| | | | | | | | | | | | | | | | | | |

${\bf Explanation\ of\ Responses:}$

- 1. SHARES ARE EXERCISABLE ONE YEAR AFTER DATE OF GRANT AT 20% PER YEAR.
- 2. To be paid in cash or stock upon termination as a director.
- 3. To be paid in cash or stock upon termination as a director.

PHYLLIS BONANNO 01/04/2005

** 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.