FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person* CRAIL FRANKLIN E				Ro	2. Issuer Name and Ticker or Trading Symbol Rocky Mountain Chocolate Factory, Inc. [RMCF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ Officer (give title below) President / Chairman BOD								
(Last) (First) (Middle) 265 TURNER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 10/19/2015							Presid	ent / Chai	irman l	BOD				
(Street)				4. It	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person								
DURAN	GO, CO 8	1303											Total fied by More than One Reporting Person						
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			Execut	Month/Day/Year) (Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership In Form: B Direct (D)		Indire Benef Owne	7. Nature of Indirect Beneficial Ownership		
						Code	V	Amount	(A) or (D)	Prio	ce				(I)	Indirect (Instrustr. 4)		. 4)	
Common		10/19/2015				S		5,000	D	\$ 11.20 (1)	606	490,803		D					
Common												91,200			I		by 401k	(plan)	
Reminder:	Report on a s	separate line	e for each class of so	I - Deriv	vative Secu	ıritic	es Acq	P co th uired	ersons wontained ne form d	tho rein the lispla	is forn ys a c r Bene	n are currec	not requesting ntly valid	ction of inf lired to res OMB conf	spond u	nless	SE	C 147	4 (9-02)
1. Title of	2	3. Transac	tion 3A. Deem	\ \ \ \ \ \ \	puts, calls		rrants _: 5.					T	itle and	Q Duina of	O. Nivanila		10.	1	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative Security	Date		Date, if	Transacti Code	on 1 () () () () () () () () () (r a (ive ies ed ed ed 3,	and Expiration Date (Month/Day/Year) An Un Sec		Amo Und Secu (Inst	ount of erlying urities cr. 3 and	8. Price of Derivative Security (Instr. 5) Reported Followir Reported Transact (Instr. 4)		ve es ally ng d ion(s)	Owner Form Deriva Securi Direct or Ind (I) (Instr.	rship of ative ity: (D) irect	of Indirect Beneficia Ownershi (Instr. 4)	
					Code	V	(A) (Oate Exercisable		iration e	Title	Amount or Number of Shares						

Reporting Owners

Describe a Occasion Name /	Relationships							
Reporting Owner Name / Address	Director	Director Officer Officer						
CRAIL FRANKLIN E 265 TURNER DRIVE DURANGO, CO 81303	X	X	President / Chairman BOD					

Signatures

/s/ Franklin E. Crail	10/19/2015

**Signature of Reporting Person	Date			

Explanation of Responses:

- * 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).
- This transaction was executed in multiple trades at prices ranging from \$11.20 to \$11.35. The price reported above reflects the weighted average sale price. The reporting (1) person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.