| FORM | 4 |
|------|---|
|------|---|

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

(Print or Type Responses)

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### 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

| 1. Name and Address<br>MERRYMAN BI | 2. Issuer Name<br>Rocky Mount<br>[RMCF]              |                          |  | 0,                 |      |                        | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>X Director 10% Owner<br>Officer (give title below) Other (specify below) |                        |  |                 |   |  |
|------------------------------------|--|--------------------------|--|--------------------|------|------------------------|--|------------------------|--|-----------------|---|--|
| (Last)<br>265 TURNER DF            | (First)<br>RIVE                                      | (Middle)                 | 3. Date of Earliest Transaction (Month/Day/Year)<br>08/10/2016                   |                    |      |                        |  |                        | COO/CFO Treasurer  |                 |   |  |
| DURANGO, CO                        | 4. If Amendment, Date Original Filed(Month/Day/Year) |                          |  |                    |      |                        | 6. Individual or Joint/Group Filing(Check Applicable Line)<br>_X_Form filed by One Reporting Person<br>Form filed by More than One Reporting Person    |                        |  |                 |   |  |
| (City)                             | (State)  | (Zip)                    | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                    |      |                        |  |                        |  |                 |   |  |
| 1.Title of Security<br>(Instr. 3)  |  | Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year)                      | Code<br>(Instr. 8) | tion | or Dispo<br>(Instr. 3, | 4. Securities Acquired (A<br>or Disposed of (D)<br>(Instr. 3, 4 and 5)<br>(A)<br>or  |                        | 5. Amount of Securities<br>Beneficially Owned Following<br>Reported Transaction(s)<br>(Instr. 3 and 4) | or Indirect (I) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownershij<br>(Instr. 4) |  |
| Common                             |  | 08/10/2016               |  | Code<br>S          | V    | Amount 600             | (D)<br>D   | Price<br>\$<br>10.0517 | 98,800   | (Instr. 4)<br>D |   |  |
| Common                             |  | 08/11/2016               |  | S                  |      | 500                    | D  | \$ 10.02               | 98,300   | D               |   |  |
| Common                             |  |                          |  |                    |      |                        |  |                        | 16,921   | Ι               | by 401k<br>(plan)   |  |

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

SEC 1474 (9-02)

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 control number.

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

|             | (e.g., puts, calls, warrants, options, convertible securities) |                  |                    |            |       |        |      |              |            |        |         |             |                |             |             |
|-------------|--|------------------|--------------------|------------|-------|--------|------|--------------|------------|--------|---------|-------------|----------------|-------------|-------------|
| 1. Title of | 2.   | 3. Transaction   | 3A. Deemed         | 4.         | 5     |        |      | 6. Date Exer | cisable    | 7. Tit | le and  | 8. Price of | 9. Number of   | 10.         | 11. Nature  |
| Derivative  | Conversion   | Date             | Execution Date, if | Transactio | n N   | lumbe  | er   | and Expirati | on Date    | Amou   | unt of  | Derivative  | Derivative     | Ownership   | of Indirect |
| Security    | or Exercise  | (Month/Day/Year) | any                | Code       | 0     | f      |      | (Month/Day   | /Year)     | Unde   | rlying  | Security    | Securities     | Form of     | Beneficial  |
| (Instr. 3)  | Price of   |                  | (Month/Day/Year)   | (Instr. 8) | D     | Deriva | tive |              |            | Secur  | rities  | (Instr. 5)  | Beneficially   | Derivative  | Ownership   |
|             | Derivative   |                  |                    |            | S     | ecurit | ties |              |            | (Instr | . 3 and |             | Owned          | Security:   | (Instr. 4)  |
|             | Security   |                  |                    |            | A     | cquir  | red  |              |            | 4)     |         |             | 0              | Direct (D)  |             |
|             |  |                  |                    |            | · · · | A) or  |      |              |            |        |         |             | T T            | or Indirect |             |
|             |  |                  |                    |            |       | Dispos |      |              |            |        |         |             | Transaction(s) |             |             |
|             |  |                  |                    |            |       | f (D)  |      |              |            |        |         |             | (Instr. 4)     | (Instr. 4)  |             |
|             |  |                  |                    |            | · ·   | Instr. |      |              |            |        |         |             |                |             |             |
|             |  |                  |                    |            | 4     | , and  | 5)   |              |            |        |         |             |                |             |             |
|             |  |                  |                    |            |       |        |      |              |            |        | Amount  |             |                |             |             |
|             |  |                  |                    |            |       |        |      | Date         | Expiration |        | or      |             |                |             |             |
|             |  |                  |                    |            |       |        |      | Exercisable  |            | Title  | Number  |             |                |             |             |
|             |  |                  |                    |            |       |        |      | LACICISADIC  | Date       |        | of      |             |                |             |             |
|             |  |                  |                    | Code V     | / (   | A)     | (D)  |              |            |        | Shares  |             |                |             |             |

## **Reporting Owners**

|   | Relationships |              |                   |       |  |  |  |  |
|---|---------------|--------------|-------------------|-------|--|--|--|--|
| Reporting Owner Name /<br>Address                         | Director      | 10%<br>Owner | Officer           | Other |  |  |  |  |
| MERRYMAN BRYAN J<br>265 TURNER DRIVE<br>DURANGO, CO 81303 | Х             |              | COO/CFO Treasurer |       |  |  |  |  |

## Signatures

| /s/ Bryan J. Merryman | 08/11/2016 |
|-----------------------|------------|
|                       |            |

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).

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.