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 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

	pe Response																
Name and Address of Reporting Person * Coupe Donna L.				Roc	Issuer Name and Ticker or Trading Symbol Rocky Mountain Chocolate Factory, Inc. [RMCF]							Direc	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) VP Franchise Support				
(Last) (First) (Middle) 265 TURNER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 07/11/2017								VP	Franchise S	иррогі		
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fi	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 (City	GO, CO 8	(State)	(Zip)			Ta	hle I .	- Non	-De	rivative S	Securiti	ies Acc	quired Disn	osed of or l	Reneficially	Owned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execu any	A. Deemed Execution Date, if any		3. Transaction Code (Instr. 8)						5. Amou Benefici Reported	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			7. Nature of Indirect Beneficial	
			(Month/Day/Year)		ear)	Coo	de	V	Amount	(A) or (D)	Price	(Instr. 3	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common		07/11/2017				S			1,315	D	\$ 11.18	86 10,800	10,800		D		
Common												2,960	2,960		Ι	by 401k (plan)	
Reminder:	Report on a s	separate line f	or each class of sectors of secto						Pers con the	sons whatained in form dis	no resp n this f splays	form a a cur	to the colle are not requ rently valid	uired to res I OMB con	spond unle	ess	2 1474 (9-02)
	ı	1		(e.g., p	outs, calls				tions	s, conver	tible se	curitie	es)		1		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Y	Execution Da y/Year) any	ate, if	te, if Transaction Code Year) (Instr. 8)		Number and		and	d Expiration Date Month/Day/Year)		A U Se	Title and mount of nderlying curities nstr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	Benefici Ownersk (Instr. 4)
				C	Code	V	(A)	(D)	Dat Exe		Expirat Date	tion	Amount or itle Number of Shares				

Reporting Owners

D (1 0 N /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Coupe Donna L. 265 TURNER DRIVE DURANGO, CO 81303			VP Franchise Support					

Signatures

/s/ Donna L. Coupe	07/11/2017
**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).

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.