

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

OMB APPROVAL				
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nours per response				

#### INITIAL STATEMENT OF 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 Type Responses)								
1. Name and Address of Reporting Person <sup>*</sup> McGrath Ryan R	2. Date of Event Requiring Statement (Month/Day/Year) 08/18/2017		3. Issuer Name and Ticker or Trading Symbol Rocky Mountain Chocolate Factory, Inc. [RMCF]					
(Last) (First) (Middle) 265 TURNER DRIVE			4. Relationship of Issuer		\ /	5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street)			(Check all applicable) Director10% Owner _XOfficer (give titleOther (specify below)  VP of IT		Applicable I	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
DURANGO, CO 81303								
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)		ned		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common	1,464			D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)  3. Title and A Securities Un Security (Instr. 4)		Amount of nderlying Derivativ	Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Expira Exercisable Date	Title Amour Shares	nt or Number of	Security	(D) or Indirect (I) (Instr. 5)			

# **Reporting Owners**

Donouting Owner Name /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
McGrath Ryan R 265 TURNER DRIVE DURANGO, CO 81303			VP of IT		

## **Signatures**

/s/ Ryan R. McGrath	08/31/2017
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.