# FORM 4

(Print or Type Pecnonces)

# 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

Name and Address of Reporting Person * Capdevielle Scott G				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 Officer (give title below) Officer (give title below)						
(Last) (First) (Middle) 265 TURNER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/06/2018												
(Street)				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 (City	GO, CO 8	(State)	(Z	Zip)		Tabla I	No	D	aulyzatisya	Coonwitt		rined Dies		Donofisially	Owned	
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		A. Deemed Execution Date, i	3. Tra	3. Transactio Code (Instr. 8)					Beneficially Owned Following Reported Transaction(s)			6. 7. Ownership Form: B	Beneficial	
				Month/Day/Year	Co	de	V	Amount	(A) or (D)	Price	(Instr. 3	(Instr. 3 and 4)		` /	Ownership (Instr. 4)	
Common		02/06/20	018		S			961	D	\$ 12.203	9,573	9,573		D		
Common		02/07/20	018		S			961	D	\$ 12.232	5 8,612	8,612		D		
Reminder:	Report on a s	separate line			rities beneficially			Per cor the	rsons wh ntained i form di	no resp in this f splays	form ar a curre	e not requently valid	OMB con	formation spond unleading trol number	ss	1474 (9-02)
	· · ·		tion 3A. Exe	Deemed ecution Da	e.g., puts, calls,	secu Acqu (A) c Disp of (E (Insti-4, an	5. 6. Number of Operivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ons, convertible secur  Date Exercisable and Expiration Date Month/Day/Year)  Date Expiration Date Date Expiration Date		curities 7. 1 Ann Un- Sec (Ins 4)	•	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)

## **Reporting Owners**

B 41 0 V 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Capdevielle Scott G 265 TURNER DRIVE DURANGO, CO 81303	X						

### **Signatures**

/s/ Scott G. Capdevielle	02/07/2018
**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.