## 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.				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)  Director Officer (give title below) Other (specify below)  VP Franchise Support					
265 TUR	NER DRI	(First) VE	(Middle)	3. Date of 01/15/20		t Trans	action	ı (Mo	onth/Day	/Year)			VP	Franchise St	іррогі	
(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	GO, CO 8	1303										FOIII III	ed by More than	Olie Reporting	reison	
(City	r)	(State)	(Zip)		T	able I -	Non-	-Deri	ivative S	Securitie	s Acqu	iired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if any (Month/Day/Year		(Instr. 8)		tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)			Ownership o Form:	Beneficial			
				(Month/Da	iy/ i cai		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common		01/15/2020			S	S		4,000	D	\$ 8.76	23,800		D			
Common											3,251			I	by 401k (plan)	
Reminder:	Report on a s	separate line fo	r each class of secur	ities benefic	cially o	wned d	F	ers	ons wh	o respo			ction of in			1474 (9-02)
			Table II - I	Derivative			t quire	he fo	orm dis	splays a	curre	ently valid	OMB con	spond unle trol numbe		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		n 3A. Deemed Execution Da any	4. Transaction Code Year) (Instr. 8)		5. 6. D Number and		6. Da and I	Date Exercisable Expiration Date onth/Day/Year)		7. T Am Und Sec	Fitle and abount of derlying purities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct ( or Indir	Benefici Ownersh (Instr. 4)
				Cod	e V	(A)		Date Exer		Expiration Date	on Titl	Amount or Number of Shares				

#### **Reporting Owners**

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

### **Signatures**

/s/ Donna L. Coupe	01/15/2020
**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.