FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average bure	rden									
hours per response:	1.0									
	OMB Number: Estimated average burn									

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions R	eported.	File	ed pursuant to or Section					ities Excha ompany Ac								
1. Name and Address of Reporting Person* YOUNG STEPHEN D					2. Issuer Name and Ticker or Trading Symbol FRANKLIN COVEY CO [FC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 2220 W PARKWAY BLVD				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 08/31/2015							/Year)	X Officer (give title below) Other (specification) Chief Financial Officer					
(Street) SALT LAKE CITY UT 84119				4. If Amendment, Date of 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						
(City)	(Sta		Zip)	rative Coo				ad Di		of or	Danafiai	ally C)	. d			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		ed, Disposed of, or Benefic 4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)				sed 5. Amou Securiti Benefic		int of		ership n: Direct	7. Nature of Indirect Beneficial Ownership	
				(Month/Day/Te		ear) o)		Amoui	nt	(A) or (D) Price		Is Ye	Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)
common shares			11/18/2014		G		j	5,	,000	D \$0		139,3		9,383		D	
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Nur of Deriv Secur Acqu (A) or Dispo of (D) (Instr. and 5	ative rities ired osed	Expir	ation Da	Exercisable and ion Date (Day/Year)		le and unt of rities ritylying rative rity (Instr. 3		vative deri urity Sec r. 5) Ber Own Foll Rep Trai	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Number of Shares						

Explanation of Responses:

Remarks:

/s/ Stephanie King, Attorneyin-Fact

10/05/2015

** Signature of Reporting Person

Date

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

- * 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.

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 Number.