FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

ı	UMB APPRO	JVAL							
	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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  YOUNG STEPHEN D					2. Issuer Name <b>and</b> Ticker or Trading Symbol FRANKLIN COVEY CO [ FC ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title Other (specify below))							
(Last) 2220 W	(F PARKWAY	(First) (Middle) Y BLVD				3. Date of Earliest Transaction (Month/Day/Year) 12/19/2019											below)				
(Street) SALT LA	ALT LAKE LIT 8/119			4. 1	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)	(S	tate)	(Zip)																		
		Tab	le I - No			_			<del>-</del>	Dis	posed o										
Dat			Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5)   Securiti		s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	Amount (A) or (D)		е	Transaction(s) (Instr. 3 and 4)				(IIIsti. 4)			
common	shares			12/1	2/19/2019				M		43,750	1) A	\$	\$10 20		07,012		D			
common shares				12/1	9/2019				M		43,750	1) A	\$	\$12 250		),762		D			
common shares 12/19/				9/2019	2019			M		43,750	1) A	\$	14	294	4,512		D				
common shares 12/19/2				9/2019	019		F		83,410	2) <b>D</b>	\$34	4.72	211,102			D					
		٦	Table II -								osed of, convertib				wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date, Transa Code (			ction of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amous or Number of Shares	ber							
Employee stock option (right to buy)	\$10	12/19/2019			M			43,750	01/28/20	)10	01/28/2020	common stock	43,75	50	\$0	0		D			
Employee stock option (right to buy)	\$12	12/19/2019			M			43,750	01/28/20	)10	01/28/2020	common stock	43,75	50	\$0	0		D			
Employee stock option (right to buy)	\$14	12/19/2019			M			43,750	01/28/20	)10	01/28/2020	common stock	43,75	50	\$0	0		D			

## **Explanation of Responses:**

- 1. This Form 4 represents the exercise of stock options that Mr. Young received almost ten years ago. These options would have expired January 2020. He exercised the options selecting the net-exercise
- 2. This amount represents shares surrendered to cover the exercise amount and pay taxes.

/s/ Stephen D. Young, Attorney-in-Fact

12/19/2019

\*\* 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.