FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(h)

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 an		2. Issuer Name <b>and</b> Ticker or Trading Symbol FRANKLIN COVEY CO [ FC ]										oplicable) ector		g Person(s) to Issuer 10% Owner						
(Last) (First) (Middle) 2200 WEST PARKWAY BLVD						3. Date of Earliest Transaction (Month/Day/Year) 01/12/2012										Officer (give title below)		Other below	(specify )	
(Street) SALT LA CITY (City)	ALT LAKE UT 84119					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tabl	le I - N	on-Deriv	/ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)						Execution Date			3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			and 5)   Securit		ties cially Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Price		Transa	action(s) 3 and 4)			(11150.4)				
common shares 01/12/20						)12			P		9,000	A	\$8.249(1		354,876			D		
common shares														1,611,118 <sup>(2)</sup>			I	see footnote <sup>(3)</sup>		
		Та	able 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. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		ate	Amount of		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V		(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares								

## Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$8.2399 to \$8.25, inclusive. The reporting person undertakes to provide Franklin Covey Co., any security holder of Franklin Covey Co., or the staff of the Securities and Exchange Commission, on request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote to this Form 4.
- 2. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownerhip of all the reported shares for purposes of Section 16 or for any other purpose.
- 3. Owned by Knowledge Capital Investment Group. The reporting person is a principal of the Hampstead Group, LLC, the private investment firm that sponsors Knowledge Capital Investment Group.

## Remarks:

/s/ Stephen D. Young, Attorney-in-Fact 01/13/2012

\*\* 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.