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 burden							
hours per response:	1.0						

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 (Check all applicable) Director				10%	Owner		
(Last) (First) (Middle) 2220 W PARKWAY BLVD			3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 08/31/2017					Year)	X Officer (give title below) Other (specify below) Chief Financial Officer					v)`			
(Street) SALT LA CITY	UI		4119	4. If Amendment, Date of Original Filed (Month/Day/Year)							_ine)	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
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.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)				5. Amou Securiti Benefic		int of		ership n: Direct	7. Nature of Indirect Beneficial Ownership		
					,		Amour	nt	(A) or (D)			Issuer's Year (Ins 4)	Fiscal str. 3 and	Indir (Inst		(Instr. 4)	
common shares 03		03/31/2017		G		j	5,	000	D	D \$0		143,169		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
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. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed	Expiration (Mont	te Exerc ation Da th/Day/Y		Amount of Securities Underlying Derivative Security (Instrand 4) Amount of Management of Security (Instrand 4)		nt :r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)

Explanation of Responses:

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

10/11/2017

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).