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

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*  Hutcheson Jennifer L  (Last) (First) (Middle)  ONE GAYLORD DRIVE  (Street)  NASHVILLE TN 37214						Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP]     3. Date of Earliest Transaction (Month/Day/Year) 07/15/2019  4. If Amendment, Date of Original Filed (Month/Day/Year)							) 6	S. Relationship of Reporting Person(s) to Issuer (Check all applicable)      Director 10% Owner      X Officer (give title Other (specify below) below)      SVP, Corporate Controller, CAO      6. Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person			
(City)			Zip)		,									Form Pers	•	e than One Rep	orting
		Tab	le I - No	on-Deriv	ative S	Sec	uriti	es A	cquired, [	Disp	osed	of, or B	enefici	ally Own	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ny	ned n Date ay/Yea	Code (In	tion Dispo		curities Acquired (A sed Of (D) (Instr. 3 )				6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amou	nt (A)	or Pric	Repor		(Instr. 4)	(Instr. 4)
		Та							uired, Dis s, options					y Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execution (Month/Day/Year) if any		n Date,	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Security (Instr. :		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expi Date	iration	Title	Amount or Number of Shares				
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	872		872 <sup>(2)</sup>	D	
Restricted Stock Units	\$0.00								(3)		(3)	Common Stock	2,087		2,087 <sup>(2)</sup>	D	
Restricted Stock Units	\$0.00								(4)		(4)	Common Stock	2,398		2,398 <sup>(2)</sup>	D	
Restricted Stock Units	\$0.00								(5)		(5)	Common Stock	2,820		2,820 <sup>(2)</sup>	D	

## Explanation of Responses:

- 1. Restricted stock unit vests on a one-to-one share basis on March 15, 2020.
- 2. In accordance with the terms of the reporting person's outstanding restricted stock unit awards, as a result of the \$0.90 dividend per share of outstanding common stock paid by the issuer on July 15, 2019, the reporting person received additional restricted stock units in an amount based on the amount of the dividend per share and the closing price of the issuer's common stock traded on the NYSE on June 28, 2019.
- 3. Restricted stock unit vests on a one-to-one share basis ratably in 1/4 increments for four years beginning on March 15, 2018.
- 4. Restricted stock unit vests on a one-to-one share basis ratably in 1/4 increments for four years beginning on March 15, 2019.
- 5. Restricted stock unit vests on a one-to-one share basis ratably in 1/4 increments for four years beginning on March 15, 2020.

## Remarks:

Scott J. Lynn, Attorney-in-Fact for Jennifer L. Hutcheson

07/15/2019

\*\* 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.