FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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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

									Investment		•	J. UI 194		_						
1. Name and Address of Reporting Person* FIORAVANTI MARK						2. Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [ RHP ]									Relationsh ieck all ap Dire	plicable)	ig Person(s) to	Issuer Owner		
(Last)	(F AYLORD D	•	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2017										cer (give title w)		(specify		
(Street)  NASHVILLE TN 37214  (City) (State) (Zip)							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				
		Tab	le I - N	lon-Deriv	/ative	Sec	urit	ties Ac	quired, I	Disp	osed	of, or	Bene	eficial	lly Own	ed				
1. Title of Security (Instr. 3)				2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					Secur Bene Owne	ficially ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	V Amou			(A) or (D)								
Common Stock				03/15/2	2017				М		1,79	93	A	\$0.0	0 1	48,914	D			
Common Stock				03/15/2	2017				F		753	(1)	D	\$0.0	0 1	48,161	D			
Common Stock 03/15					.017			M		2,04	19	A	\$0.0	0 1	50,210	D				
Common Stock 03/15					2017			F		860(2)		D	\$0.0	.00 149,350		D				
		T	able II						uired, Dis						Owned	I				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	if any	emed ion Date,	4. Transac Code (li 8)	5. tion Number		mber rivative curities quired or sposed (D) str. 3,	6. Date Exer Expiration I (Month/Day	cisa Date	ble and	7. Title Amoun Securit Underl Derivat	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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.	Beneficial Ownership		
						v	(A)		Date Exercisable		xpiration ate	Title	or Nui of	mber ares						
Restricted Stock Units	\$0.00	03/15/2017			M			1,793	03/15/2017	02/	24/2019	Commo	n 1,	793	\$0.00	3,546	D			
Restricted Stock Unit	\$0.00	03/15/2017			M			2,049	03/15/2017	02/	24/2020	Commo	n 2,0	049	\$0.00	6,147	D			
		1					1			1								1		

## **Explanation of Responses:**

- 1. Represents shares withheld to satisfy Mr. Fioravanti's tax withholding obligation with respect to the 1,793 shares of common stock issued upon the vesting of time-based restricted stock units (including accrued dividend equivalent units payable in additional shares of common stock) on March 15, 2017. Mr. Fioravanti retained the remaining 1,040 shares
- 2. Represents shares withheld to satisfy Mr. Fioravanti's tax withholding obligation with respect to the 2,049 shares of common stock issued upon the vesting of time-based restricted stock units (including accrued dividend equivalent units payable in additional shares of common stock) on March 15, 2017. Mr. Fioravanti retained the remaining 1,189 shares.

## Remarks:

Scott J. Lynn, Attorney-in-Fact for Mark Fioravanti

03/15/2017

\*\* Signature of Reporting Person

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.