FORM 4

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT O
Section 16. Form 4 or Form 5	

F CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Lynn Scott J (Last) (First) (Middle) ONE GAYLORD DRIVE				3. E	Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP] One of Earliest Transaction (Month/Day/Year) 10/13/2017									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) SVP, Secretary and GC					
(Street) NASHVILLE TN 37214 (City) (State) (Zip)				-	4. If Amendment, Date of Original Filed (Month/Day/Year) Ative Securities Acquired, Disposed of, or Benefic								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action	2A. Deeme Execution			ar) 3. Transa Code (I 8)	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		A) or , 4 and	5. Amou Securiti Benefic Owned Reporte	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Т	able II - D						quired, D s, option			or Be	nefic		(Instr. 3				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		opiration	Title	or	ount mber ires					
Restricted Stock Units	\$0.00								(1)		(1)	Commo	1,3	126		1,126 ⁽²⁾)	D	
Restricted Stock Units	\$0.00								(3)		(3)	Commo Stock	2,4	437		2,437 ⁽²⁾		D	
Restricted Stock Units	\$0.00								(4)		(4)	Commo Stock	2,5	547		2,547 ⁽²⁾		D	
Restricted Stock	\$0.00								(5)		(5)	Commo	¹ 2,5	547		2,547 ⁽²⁾		D	

Explanation of Responses:

- 1. Restricted stock unit vests on a one-to-one share basis on February 26, 2018.
- 2. In accordance with the terms of the reporting person's outstanding restricted stock unit awards, as a result of the \$0.80 dividend per share of outstanding common stock paid by the issuer on October 13, 2017, 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 September 29, 2017.
- $3. \ Restricted \ stock \ unit \ vests \ on \ a \ one-to-one \ share \ basis \ ratably \ in \ 1/4 \ increments \ for \ four \ years \ beginning \ on \ March \ 15, \ 2016.$
- 4. Restricted stock unit vests on a one-to-one share basis ratably in 1/4 increments for four years beginning on March 15, 2017.
- 5. Restricted stock unit vests on a one-to-one share basis ratably in 1/4 increments for four years beginning on March 15, 2018.

Remarks:

Scott J. Lynn

10/13/2017

** 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.