FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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l	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)

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

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Name and Address of Reporting Person* Hutcheson Jennifer L					2. Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner															
(Last)		irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/16/2018							2	Office below	er (give title Other		Other (below)	specify		
(Street) NASHVILLE TN 37214			4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)												Person					
		Tab	le I - Non	-Deriv	ative	Se	curiti	es A	cquired,	Dis	osed	of, or E	Benef	iciall	y Owne	d				
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)					Executi			e, Transaction Disposed Code (Instr. 5)		rities Acq ed Of (D)				es ially Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A	or P	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
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. Deeme Execution if any (Month/Day	Date,	4. Fransaction Code (Instr. 3)				6. Date Exercisa Expiration Date (Month/Day/Year		Amou Secui Unde Deriv		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		opiration	Title	Amo or Num of Shai	ber						
Restricted Stock Units	\$0.00								(1)		(1)	Commo Stock	1,1	37		1,137 ⁽²⁾		D		
Restricted Stock Units	\$0.00								(3)		(3)	Commo Stock	2,0	33		2,033 ⁽²⁾		D		
Restricted Stock Units	\$0.00								(4)		(4)	Commo Stock	2,4	95		2,495 ⁽²⁾		D		
Restricted Stock	\$0.00								(5)		(5)	Commo	¹ 3,9	39		3,939 ⁽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 January 16, 2018, 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 December
- $3. \ Restricted \ stock \ unit \ vests \ on \ a \ one-to-one \ share \ basis \ in \ 1/4 \ increments \ for \ four \ years \ beginning \ on \ March \ 15, \ 2016.$
- 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, Attorney-in-Fact 01/18/2018 for Jennifer L. Hutcheson

** 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.