FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFIC	IAL OWNERSHIP

l	OMB APPRO	DVAL
l	OMB Number:	3235-0287
l	Estimated average burd	den
1	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

1. Name and Address of Reporting Person* FIORAVANTI MARK					2. Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP]										eck all appli Directo	cable) or	g Pers	Person(s) to Issuer 10% Owner		
(Last) ONE GA	(F YLORD D	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/26/2017											Officer (give title below) President & CFO			spесіту	
(Street) NASHV (City)			37214 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Y								ar)	Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Oity)			ole I - Noi	n-Deriv	/ativ	e Se	curi	ties Ac	aui	ired.	Disi	posed o	of. or	Ben	eficiall	v Owned	1			
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) Disposed Of (D) (Instr. 3, 4			(A) or	5. Amou Securitie Benefici Owned F	nt of es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount		(A) or (D)		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock			02/20	6/201	5/2017			M		2,928		A	\$0.00	139	139,643		D			
Common Stock			02/20	6/201	/2017			F		1,229(1)		D	\$0.00	138	138,414		D			
Common Stock			02/20	6/201	5/2017				M		15,000		A	\$0.00	153	153,414		D		
Common	Stock			02/20	6/201	.7				F		6,293	(2)	D	\$0.00	147	7,121	D		
			Table II -									osed of, onvertil				Owned				
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,	1. Fransaction Code (Instr. 3)				Exp	6. Date Exercisa Expiration Date (Month/Day/Year		!	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e Coss Fully Cos	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisabl		Expiration Date	Title		Amount or Number of Shares					
Restricted Stock Units	\$0.00	02/26/2017			M			2,928	02.	2/26/201	7 0	2/26/2018	Com		2,928	\$0.00	2,894	1	D	
Restricted Stock Unit	\$0.00	02/26/2017			M			15,000	02	2/26/201	7 0	2/26/2017	Com		15,000	\$0.00	0		D	

Explanation of Responses:

- 1. Represents shares withheld to satisfy Mr. Fioravanti's tax withholding obligation with respect to the 2,928 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 February 26, 2017. Mr. Fioravanti retained the remaining 1,699 shares.
- 2. Represents shares withheld to satisfy Mr. Fioravanti's tax withholding obligation with respect to the 15,000 shares of common stock issued upon the vesting of performance-based restricted stock units on February 26, 2017. Mr. Fioravanti retained the remaining 8,707 shares.

Remarks:

Scott J. Lynn, Attorney-in-Fact

03/01/2017

** 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.