FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Secti	on 30(h) of the	e Investment	Com	pany Act	t of 1940						
1. Name and Address of Reporting Person* ROSE MICHAEL D						2. Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below)				
(Last) (First) (Middle) 1779 KIRBY PARKWAY #1					3. Date of Earliest Transaction (Month/Day/Year) 07/15/2014													
PMB #320				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MEMPHIS TN 38138														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)																		
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	es A	cquired, E	Disp	osed	of, or Be	enefici	ally Owne	ed			
Date			2. Trans Date (Month/I		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					and Securi Benefi Owned	cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	Pric		action(s) . 3 and 4)			(Instr. 4)	
		Т							quired, Dis									
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/Da	Date,	4. Transactio Code (Insti		n of		6. Date Exercisal Expiration Date (Month/Day/Year		Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		f g g Security nd 4)			ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	Amoun or Numbe of Shares	r				
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	1,912	!	1,912 ⁽²	·)	D	
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	3,449		3,449 ⁽²	2)	D	
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	3,922	!	3,922 ⁽²	2)	D	
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	1,797	,	1,797 ⁽²	2)	D	
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	6,871		6,871 ⁽²	2)	D	
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	435		435 ⁽²⁾		D	
Restricted Stock Units	\$0.00								(1)		(1)	Common Stock	1,636		1,636 ⁽²	()	D	
Restricted Stock	\$0.00								(1)		(1)	Common Stock	392		392 ⁽²⁾		D	

Explanation of Responses:

- 1. Mr. Rose has deferred vesting of these restricted stock units until either a designated date or termination of his service as a director.
- 2. In accordance with the terms of the reporting person's outstanding restricted stock unit awards, as a result of the \$0.55 dividend per share of outstanding common stock paid by the issuer on July 15, 2014, 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 27, 2014.

Remarks:

F. Mitch Walker, Jr, Attorneyin-Fact for Michael D. Rose

07/15/2014

** 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.