## FORM 4

obligations may continue. See Instruction 1(b).

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF 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

1. Name and Address of Reporting Person*  PRATHER ROBERT S JR					Ry	2. Issuer Name and Ticker or Trading Symbol     Ryman Hospitality Properties, Inc. [ RHP ]      3. Date of Earliest Transaction (Month/Day/Year)									all appli Directo	licable) tor er (give title		erson(s) to Issuer  10% Owner  Other (specify below)	
(Last) (First) (Middle) 1843 W. WESLEY ROAD NW.					01/15/2015												,		
(Street) ATLANT			30327 (Zip)		_   4.   1	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indivi ine) X					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ay/Year) Exec		med on Date Day/Ye	Code (In:	Transaction Dispo		urities Acquired (A) o sed Of (D) (Instr. 3, 4 a		and Securit Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	, ,	Amount	t (A) or (D)		.	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)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr. 8)		n of Ex		Expiration Da	i. Date Exercisable and Expiration Date Month/Day/Year)		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)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expi Date	iration	Title	Amount or Number of Shares	1					
Restricted Stock Units	\$0.00								(1)	(	(1)	Common Stock	3,525			3,525 <sup>(2)</sup>		D	
Restricted Stock Units	\$0.00								(1)	(	(1)	Common Stock	4,008			4,008 <sup>(2)</sup>		D	
Restricted Stock Units	\$0.00								(1)	(	(1)	Common Stock	3,746			3,746 <sup>(2)</sup>		D	
Restricted Stock Units	\$0.00								(1)	(	(1)	Common Stock	1,836			1,836 <sup>(2)</sup>		D	
Restricted Stock Units	\$0.00								(1)	(	(1)	Common Stock	1,671			1,671 <sup>(2)</sup>		D	

## **Explanation of Responses:**

- 1. Mr. Prather 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 January 15, 2015, 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 30, 2014.

## Remarks:

Scott J. Lynn, Attorney-in-Fact 01/15/2015 for Robert S. Prather

\*\* 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.