Merchant Fazal F Form 3 December 04, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Ad Person <u>*</u> Merchant		eporting	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP]					
(Last)	(First)	(Middle)	11/30/2017	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
705 VIA DE	L MONT	E					× • • •		
	(Street)			(Check	all applicable))	6. Individual or Joint/Group		
PALOS VEI ESTATES,Â		274		X Director Officer (give title below	Othe		Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - N	Non-Derivat	ive Securit	ies Be	neficially Owned		
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	1		
Common Sto	ock		0		D	Â			
Reminder: Repo owned directly o	or indirectly	.	ach class of securities benefic	S.	EC 1473 (7-02	2)			
	infor requi	mation cont ired to respo	ained in this form are not and unless the form displ MB control number.	t					

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	Expiration D	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
here and a second second	Director	10% Owner	Officer	Other		
Merchant Fazal F 705 VIA DEL MONTE PALOS VERDES ESTATES, CA 90274	X	Â	Â	Â		
Signatures						
Scott J. Lynn, attorney-in-fact for Fazal F. Merchant		12/04/20	17			
**Signature of Reporting Person		Date				
Explanation of Posponso	<u>.</u>					

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.