FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average to	ourden										
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

Name and Address of Reporting Person* Bhasin Rachna				<u>Ry</u>	2. Issuer Name and Ticker or Trading Symbol Ryman Hospitality Properties, Inc. [RHP]								(Ch	Relationship of Reporting (Check all applicable) X Director			son(s) to Iss			
(Last)	(Fi	rst) ((Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/15/2024									Officer (give title below)			pecify		
2421 LAKE PANCOAST DRIVE					4. If	Amen	dment	, Date	of Original	Filed	d (Month/E	ay/Year)			6. Individual or Joint/Group Filing (Check Applicable					
(Street)															X Form filed by One Reporting Person					
MIAMI	BEACH FI		33140											Form filed by More than One Reporting Person						
(City)	(Si	tate) ((Zip)		Rı	Rule 10b5-1(c) Transaction Indication														
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												d to								
		Tabl	le I - Non	-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed (of, or E	Bene	eficial	ly Owne	d				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date			e, Transaction Dispose Code (Instr. 5)		rities Acquired (A) o ed Of (D) (Instr. 3, 4			Benefici	es For ially (D) Following (I) (rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code V Amount (A) or (D)						Price	Transac	Transaction(s) (Instr. 3 and 4)			msu. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 2. Conversion Date Execution Date, (Month/Day/Year) (Instr. 3) 3. Transaction Date Execution Date, if any (Month/Day/Year)		Date,		Transaction of Code (Instr. Deriva		rative rities ired r osed)	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	OI N Of	lumber						
Restricted Stock Units	\$0								(1)		(1)	Commo Stock	n 1	1,311		1,311 ⁽²)	D		

Explanation of Responses:

- 1. Restricted Stock unit vest 100% on May 11, 2024.
- 2. In accordance with the terms of the reporting person's outstanding restricted stock unit awards, as a result of the \$1.10 dividend per share of outstanding common stock paid by the issuer on April 15, 2024, 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 March 29, 2024.

Scott J. Lynn, Attorney-in-Fact 04/15/2024 for Rachna Bhasin

** 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.