

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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2018 OCT -9 PM 2:33
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

RYMAN HOSPITALITY PROPERTIES PAC

ADDRESS (number and street) ONE GAYLORD DR

▼ Check if different than previously reported. (ACC) NASHVILLE TN 37214

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00183707

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

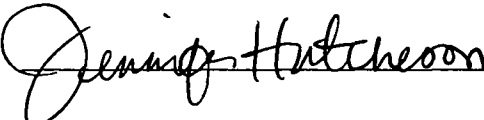
- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)
- Election on MM / DD / YYYY in the State of XX

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)
- Election on MM / DD / YYYY in the State of XX

5. Covering Period 07 / 01 / 2018 through 09 / 30 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **JENNIFER HUTCHESON**

Signature of Treasurer  Date 10 / 08 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Report Covering the Period: From:

M	M
07	01

 /

D	D
20	18

 To:

M	M
09	30

 /

D	D
20	18

	COLUMN A This Period	COLUMN B Calendar Year-to-Date					
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>20</td><td>18</td></tr></table>	M	M	20	18		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>6402054</td></tr></table>	6402054
M	M						
20	18						
6402054							
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>5577576</td></tr></table>	5577576					
5577576							
(c) Total Receipts (from Line 19)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>302090</td></tr></table>	302090	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>952542</td></tr></table>	952542			
302090							
952542							
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>5879666</td></tr></table>	5879666	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>7354596</td></tr></table>	7354596			
5879666							
7354596							
7. Total Disbursements (from Line 31)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>657583</td></tr></table>	657583	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>2132513</td></tr></table>	2132513			
657583							
2132513							
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>5222083</td></tr></table>	5222083	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>5222083</td></tr></table>	5222083			
5222083							
5222083							
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>000</td></tr></table>	000					
000							
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>000</td></tr></table>	000					
000							

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RYMAN HOSPITALITY PROPERTIES PAC

Report Covering the Period: From:

07 / 01 / 2018

To:

09 / 30 / 2018

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
- (i) Itemized (use Schedule A).....

266946

850841

- (ii) Unitemized.....

34484

99739

- (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

301430

950580

- (b) Political Party Committees.....

000

000

- (c) Other Political Committees (such as PACs).....

000

000

- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

301430

950580

12. Transfers From Affiliated/Other Party Committees.....

000

000

13. All Loans Received.....

000

000

14. Loan Repayments Received.....

000

000

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

000

000

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

000

000

17. Other Federal Receipts (Dividends, Interest, etc.).....

660

1962

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

302090

952542

- (b) Levin Funds (from Schedule H5).....

000

000

- (c) Total Transfers (add 18(a) and 18(b))..

000

000

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

302090

952542

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

302090

952542

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	6500.00	21000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations)	7583	32513
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	657583	2132513
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	657583	2132513

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	301430	950580
34. Total Contribution Refunds (from Line 28(d))	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	301430	950580
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	000	000
37. Offsets to Operating Expenditures (from Line 15, page 3)	000	000
38. Net Operating Expenditures (subtract Line 37 from Line 36)	000	000

2025 RELEASE UNDER E.O. 14176

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 9	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
RYMAN HOSPITALITY PROPERTIES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHAFFIN, PATRICK

Mailing Address
ONE GAYLORD DR.

City **NASHVILLE** State **TN** Zip Code **37214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RYMAN HOSPITALITY PROP.** Occupation (for Individual) **EVP, ASSET MGT.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
09 / 27 / 2018

Amount of Each Receipt this Period
120.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHAMBLIN, JAMES

Mailing Address
ONE GAYLORD DR.

City **NASHVILLE** State **TN** Zip Code **37214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RYMAN HOSPITALITY PROP.** Occupation (for Individual) **SVP, DESIGN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
573.84

Date of Receipt
09 / 27 / 2018

Amount of Each Receipt this Period
182.88

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHERRY, SIDNEY

Mailing Address
ONE GAYLORD DRIVE

City **NASHVILLE** State **TN** Zip Code **37214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RYMAN HOSPITALITY PROP.** Occupation (for Individual) **VP, TAX**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
677.63

Date of Receipt
09 / 27 / 2018

Amount of Each Receipt this Period
216.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **519.18**

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 7 OF 9

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

RYMAN HOSPITALITY PROPERTIES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FIORAVANTI, MARK

Mailing Address

ONE GAYLORD DRIVE

City

NASHVILLE

State

TN

Zip Code

37214

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

RYMAN HOSPITALITY PROP.

Occupation (for Individual)

PRES. & CFO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

115225

Date of Receipt

09 / 27 / 2018

Amount of Each Receipt this Period

36726

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHESON, JENNIFER

Mailing Address

ONE GAYLORD DRIVE

City

NASHVILLE

State

TN

Zip Code

37214

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

RYMAN HOSPITALITY PROP.

Occupation (for Individual)

SVP & CAO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 27 / 2016

Amount of Each Receipt this Period

12000

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYNN, SCOTT

Mailing Address

ONE GAYLORD DRIVE

City

NASHVILLE

State

TN

Zip Code

37214

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

RYMAN HOSPITALITY PROP.

Occupation (for Individual)

EVP, GC

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

123625

Date of Receipt

09 / 27 / 2016

Amount of Each Receipt this Period

39750

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

88476

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 9	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RYMAN HOSPITALITY PROPERTIES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NAPIER, SHERMAN CRAIG

Mailing Address
ONE GAYLORD DR

City **NASHVILLE** State **TN** Zip Code **37214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RYMAN HOSPITALITY PROP.** Occupation (for Individual) **VP, COMPLIANCE**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **35024**

Date of Receipt **09 / 27 / 2018**

Amount of Each Receipt this Period **1117.2**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REED, COLIN

Mailing Address
ONE GAYLORD DR

City **NASHVILLE** State **TN** Zip Code **37214**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RYMAN HOSPITALITY PROP.** Occupation (for Individual) **CHAIRMAN/CEO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **36537.0**

Date of Receipt **09 / 27 / 2018**

Amount of Each Receipt this Period **11538.0**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **12655.2**

TOTAL This Period (last page this line number only).....▶ **26694.6**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 9

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
RYMAN HOSPITALITY PROPERTIES PAC

A. Full Name (Last, First, Middle Initial)
FRIENDS OF ROBERT SWOPE

Date of Disbursement
MM / DD / YYYY
07 / 18 / 2018

Mailing Address
5025 MARC DRIVE

City **NASHVILLE** State **TN** Zip Code **37211**

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
ROBERT SWOPE

Office Sought: House Senate President
METRO-NASHVILLE COUNSEL

Disbursement For: Primary General Other (specify) ▼

State: **TN** District:

FEC Identification Number
C

Amount of Each Disbursement this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOTEL PAC

Date of Disbursement
MM / DD / YYYY
08 / 20 / 2018

Mailing Address
1250 EYE STREET NW, STE 1100

City **WASHINGTON** State **DC** Zip Code **20005**

Purpose of Disbursement
PAC CONTRIBUTION

Candidate Name
NIA

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **6500.00**

TOTAL This Period (last page this line number only).....▶ **6500.00**

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RT 723

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ONE GAYLORD DRIVE

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CAD: 1185386/NET4040

NASHVILLE, TN 37214
UNITED STATES US

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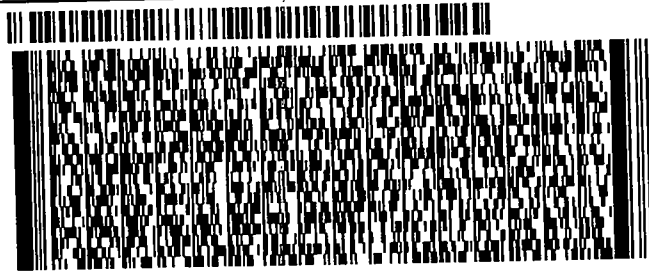
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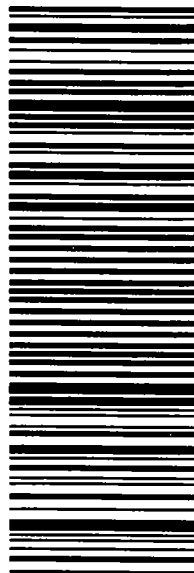
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FED-EX</i>	Shipping Date <i>10-8-18</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>af</i> PREPARER	<i>10-9-18</i> DATE PREPARED