



RYMAN HOSPITALITY PROPERTIES, INC.

A REAL ESTATE INVESTMENT TRUST

**SCOTT J. LYNN**

SENIOR VICE PRESIDENT AND GENERAL COUNSEL

RECEIVED  
FEC MAIL CENTER  
2015 JUL -9 AM 10:48

July 7, 2015

**VIA FEDEX**

PAC Filing Department  
Federal Election Commission  
999 E Street NW  
Washington, DC 20463

Re: Mid-Year 2015 PAC Report for Ryman Hospitality Properties PAC (C00183707)

Ladies and Gentlemen:

Please find enclosed the above-referenced PAC report. Please contact me at [slynn@rymanhp.com](mailto:slynn@rymanhp.com) or 615.316.6180 should you need any additional information with respect to our PAC filing.

Sincerely,

Scott Lynn

Enclosure

NONPROFIT ORGANIZATION

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 JUL -9 AM 10:48 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 Drive

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

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00183707

3. IS THIS REPORT NEW OR AMENDED

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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01/01/2015 through 06/30/2015

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

Jennifer Hutcheson

Date

07/07/2015

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

Office Use Only grid with FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Ryman Hospitality Properties PAC

Report Covering the Period: From:

01 : 01 : 2015

To:

06 : 30 : 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		1,081,556.2
(b) Cash on Hand at Beginning of Reporting Period	1,081,556.2	
(c) Total Receipts (from Line 19)	6,250.75	6,250.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,144,406.37	1,144,406.37
7. Total Disbursements (from Line 31)	21,735.71	21,735.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	92,670.66	92,670.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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. 06/2004)

Page 3

Write or Type Committee Name

**Ryman Hospitality Properties PAC**

Report Covering the Period: From: 01 01 2015 To: 06 30 2015

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).....	6,120.44	6,120.44
(ii) Unitemized.....	101.01	101.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6,221.45	6,221.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	6,221.45	6,221.45
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	29.30	29.30
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6,250.75	6,250.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6,250.75	6,250.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. Disbursements</b>		<b>COLUMN A</b> Total This Period	<b>COLUMN B</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 .....		21,300.00	21,300.00
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 .....		435.71	435.71
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)) ..		21,735.71	21,735.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶		21,735.71	21,735.71

NON-FEDERAL SHARE

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	6,221.45	6,221.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6,221.45	6,221.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

NONPROFIT CORPORATION

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE <u>6</u> OF <u>16</u>							
	<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

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**

Full Name (Last, First, Middle Initial) <b>A. Reed, Colin V.</b>			Date of Receipt M M / D D / Y Y Y Y <b>06 30 2015</b>
Mailing Address <b>One Gaylord Drive</b>			Amount of Each Receipt this Period <b>2,499.90</b>
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Ryman Hospitality Properties</b>		Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>2,499.90</b>	

Full Name (Last, First, Middle Initial) <b>B. Fioravanti, Mark</b>			Date of Receipt M M / D D / Y Y Y Y <b>06 30 2015</b>
Mailing Address <b>One Gaylord Drive</b>			Amount of Each Receipt this Period <b>695.33</b>
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>		Occupation <b>CFD</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>695.33</b>	

Full Name (Last, First, Middle Initial) <b>C. Lynn, Scott</b>			Date of Receipt M M / D D / Y Y Y Y <b>06 30 2015</b>
Mailing Address <b>One Gaylord Drive</b>			Amount of Each Receipt this Period <b>648.68</b>
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>		Occupation <b>GENERAL COUNSEL</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>648.68</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>3,843.91</b>
TOTAL This Period (last page this line number only).....▶	

NON-PROFIT CORPORATION

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 16  
(check only one)

<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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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 (Last, First, Middle Initial)  
**CHERRY, SIDNEY**

Mailing Address  
**ONE GAYLORD DRIVE**

City State Zip Code  
**NASHVILLE TN 37214**

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

Name of Employer Occupation  
**RYMAN HOSPITALITY PROP. VP, TAX**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**403.34**

Date of Receipt  
**06 30 2015**

Amount of Each Receipt this Period  
**403.34**

B. Full Name (Last, First, Middle Initial)  
**CHAMBLIN, JAMES**

Mailing Address  
**ONE GAYLORD DRIVE**

City State Zip Code  
**NASHVILLE TN 37214**

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

Name of Employer Occupation  
**RYMAN HOSPITALITY PROP. VP, DESIGN**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**303.83**

Date of Receipt  
**06 30 2015**

Amount of Each Receipt this Period  
**303.83**

C. Full Name (Last, First, Middle Initial)  
**CHAFFIN, PATRICK**

Mailing Address  
**ONE GAYLORD DRIVE**

City State Zip Code  
**NASHVILLE TN 37214**

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

Name of Employer Occupation  
**RYMAN HOSPITALITY PROP. SVP, ASSET MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**260.00**

Date of Receipt  
**06 30 2015**

Amount of Each Receipt this Period  
**260.00**

**SUBTOTAL** of Receipts This Page (optional).....▶ **967.17**

**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: PAGE 8 OF 16

(check only one)

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

Full Name (Last, First, Middle Initial) <b>A. HUTCHESON, JENNIFER</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>260.00</b>
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>260.00</b>
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>SVP &amp; CONTROLLER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>260.00</b>	

Full Name (Last, First, Middle Initial) <b>B. BALLENTINE, DEBBIE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>225.61</b>
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>225.61</b>
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>E.D. OPERATIONS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>225.61</b>	

Full Name (Last, First, Middle Initial) <b>C. NAPIER, SHERMAN C.</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>216.41</b>
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>216.41</b>
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>DIR., COMPLIANCE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>216.41</b>	

<b>SUBTOTAL of Receipts This Page (optional)</b>	<b>702.02</b>
<b>TOTAL This Period (last page this line number only)</b>	

20150630 10:00 AM 00000010

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)  
**RYMAN HOSPITALITY PROPERTIES PAC**

Full Name (Last, First, Middle Initial) <b>A. SMITH, LAUREN (MAC)</b>		Date of Receipt <b>06 30 2015</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>134.26</b>
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>DIR. OPERATIONS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>134.26</b>	

Full Name (Last, First, Middle Initial) <b>B. BUCHANAN, STEPHEN</b>		Date of Receipt <b>06 30 2015</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>130.00</b>
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C.</b>		
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>EVP, MEDIA &amp; ENTER.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>130.00</b>	

Full Name (Last, First, Middle Initial) <b>C. WESTBROOK, BENNETT</b>		Date of Receipt <b>06 30 2015</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>130.00</b>
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>SVP, DEVELOPMENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>130.00</b>	

SUBTOTAL of Receipts This Page (optional).....	<b>39426</b>
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 10 OF 16
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**RYMAN HOSPITALITY PROPERTIES PAC**

Full Name (Last, First, Middle Initial) <b>A. COLLIER, DAVID</b>		Date of Receipt 06 30 2015
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period 111.50
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>EVENTS MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 111.50	

Full Name (Last, First, Middle Initial) <b>B. HANTON, JEFF</b>		Date of Receipt 06 30 2015
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period 101.58
City <b>NASHVILLE</b>	State Zip Code <b>TN 37214</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RYMAN HOSPITALITY PROP.</b>	Occupation <b>SR. ANALYST</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 101.58	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....	213.08
TOTAL This Period (last page this line number only).....	6,120.44

**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 11 OF 16	
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)  
**Ryman Hospitality Properties PAC**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MEGAN BARRY</b>		Date of Disbursement 01 / 12 / 2015
Mailing Address 2017 20TH AVENUE SOUTH		Amount of Each Disbursement this Period 1,000.00
City NASHVILLE	State TN	
Zip Code 37212		Amount of Each Disbursement this Period 1,000.00
Purpose of Disbursement CAMPAIGN CONTRIBUTION-NASHVILLE TN MAYORAL		
Candidate Name MEGAN BARRY		Category/ Type 011
Office Sought: MAYOR OF NASHVILLE	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TN	District:	

Full Name (Last, First, Middle Initial) <b>B. CHARLES ROBERT BONE FOR MAYOR</b>		Date of Disbursement 01 / 12 / 2015
Mailing Address 511 UNION STREET STE 1600		Amount of Each Disbursement this Period 1,000.00
City NASHVILLE	State TN	
Zip Code 37219		Amount of Each Disbursement this Period 1,000.00
Purpose of Disbursement CAMPAIGN CONTRIBUTION-NASHVILLE TN MAYORAL		
Candidate Name CHARLES ROBERT BONE		Category/ Type 011
Office Sought: MAYOR OF NASHVILLE	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TN	District:	

Full Name (Last, First, Middle Initial) <b>C. FOX FOR MAYOR 2015</b>		Date of Disbursement 01 / 12 / 2015
Mailing Address P.O. BOX 330009		Amount of Each Disbursement this Period 1,000.00
City NASHVILLE	State TN	
Zip Code 37203		Amount of Each Disbursement this Period 1,000.00
Purpose of Disbursement CAMPAIGN CONTRIBUTION-NASHVILLE TN MAYORAL		
Candidate Name DAVID FOX		Category/ Type 011
Office Sought: MAYOR OF NASHVILLE	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TN	District:	

SUBTOTAL of Disbursements This Page (optional).....	3,000.00
TOTAL This Period (last page this line number only).....	

UNION STREET 1600 STE 511





**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Ryman Hospitality Properties PAC**

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT TIM GARRETT VICE MAYOR		Date of Disbursement
Mailing Address 1922 TINNIN ROAD		03 24 2015
City GOODLETTSVILLE	State TN	Zip Code 37202
Purpose of Disbursement CAMPAIGN CONTRIBUTION-NASHVILLE TN VICE-MAYOR	011	Amount of Each Disbursement this Period
Candidate Name TIM GARRETT	Category/ Type	500.00
Office Sought: VICE MAYOR OF NASHVILLE State: TN	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 9TH	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. COHEN FOR CONGRESS		Date of Disbursement
Mailing Address 2622 POPLAR AVE		03 24 2015
City MEMPHIS	State TN	Zip Code 38112
Purpose of Disbursement CAMPAIGN CONTRIBUTION - U.S. HOUSE	011	Amount of Each Disbursement this Period
Candidate Name STEVE COHEN	Category/ Type	500.00
Office Sought: U.S. HOUSE OF REP. State: TN	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. FREEMAN FOR MAYOR		Date of Disbursement
Mailing Address P.O. Box 150809		05 20 2015
City NASHVILLE	State TN	Zip Code 37215
Purpose of Disbursement CAMPAIGN CONTRIBUTION-NASHVILLE TN MAYORAL	011	Amount of Each Disbursement this Period
Candidate Name BILL FREEMAN	Category/ Type	6,600.00
Office Sought: MAYOR OF NASHVILLE State: TN	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....	7,600.00
TOTAL This Period (last page this line number only).....	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Ryman Hospitality Properties PAC**

Full Name (Last, First, Middle Initial)

A. **FRIENDS OF JEFF SYRACUSE METRO COUNCL 15TH DISTRICT**

Date of Disbursement

04 / 28 / 2015

Mailing Address

**222 GRAEME DRIVE**

City

**NASHVILLE**

State

**TN**

Zip Code

**37214**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION - NASHVILLE METRO COUNCL**

Candidate Name

**JEFF SYRACUSE**

011  
Category/  
Type

Amount of Each Disbursement this Period

200.00

Office Sought:

**NASHVILLE  
METRO COUNCL**

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: **TN**

District: **15**

Full Name (Last, First, Middle Initial)

B. **DAVID BRILEY FOR VICE MAYOR**

Date of Disbursement

06 / 25 / 2015

Mailing Address

**3804 BRUSH HILL ROAD**

City

**NASHVILLE**

State

**TN**

Zip Code

**37216**

Purpose of Disbursement

**CAMPAIGN CONTRIBUTION - VICE MAYOR**

Candidate Name

**DAVID BRILEY**

011  
Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

**VICE MAYOR  
OF NASHVILLE**

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: **TN**

District:

Full Name (Last, First, Middle Initial)

C. \_\_\_\_\_

Date of Disbursement

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

1,200.00

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Ryman Hospitality Properties PAC**

Full Name (Last, First, Middle Initial) <b>A. SUNTRUST BANK</b>		Date of Disbursement <b>06 30 2015</b>
Mailing Address <b>2503 LEBANON ROAD</b>		
City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37214</b>
Purpose of Disbursement <b>BANK FEE</b>	Candidate Name	Amount of Each Disbursement this Period <b>219.43</b>
Category/Type <b>001</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RYMAN HOSPITALITY PROPERTIES, INC</b>		Date of Disbursement <b>06 30 2015</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		
City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code
Purpose of Disbursement <b>EXPENSE REIMBURSEMENT</b>	Candidate Name	Amount of Each Disbursement this Period <b>216.28</b>
Category/Type <b>001</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<b>435.71</b>
TOTAL This Period (last page this line number only).....▶	<b>21,735.71</b>

20150630 10:00:00 AM



7/7/2015

From: (615) 316-6137  
Caroline Jones  
Ryman Hospitality Properties, Inc.  
ONE GAYLORD DRIVE  
NASHVILLE, TN 37214

Origin ID: BNAA

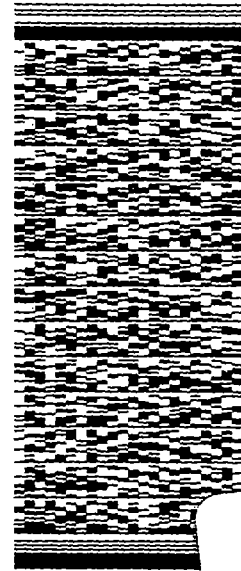


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PAC Filing Department  
Federal Election Commission  
999 E. Street NW

US GOVERNMENT OFFIC, DC 20463



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ActWgt 1.0 LB  
CAD: 1185386/NET3610

Delivery Address Bar Code



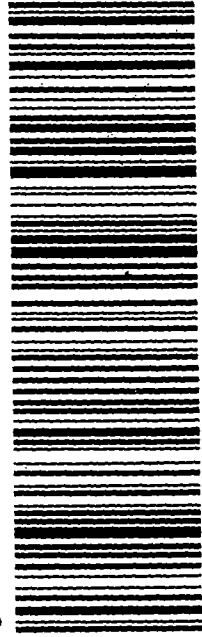
Ref # 3105-1002-191801-654001  
Invoice #  
PO #  
Dept #

THU - 09 JUL AA  
STANDARD OVERNIGHT

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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<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): <u>Fed Ex</u>	Shipping Date <u>7/7/15</u> 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
 PREPARER	<u>7/9/15</u> DATE PREPARED

(3/2015)

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