

**FEC  
FORM 3X**

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

RECEIVED

2015 JAN -2 AM 9:14

FEC MAIL CENTER

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 (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  

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

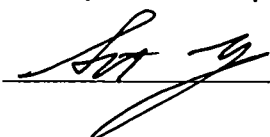
Election on MM/DD/YYYY in the State of TN

5. Covering Period MM/DD/YYYY through MM/DD/YYYY

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 By: Scott Lynn, Asst. Treasurer on behalf of Jennifer Hutcherson, Treasurer

Signature of Treasurer



Date

MM/DD/YYYY

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							
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**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, INC.

Report Covering the Period:

From:

10 / 01 / 2014

To:

11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		120,407.16
(b) Cash on Hand at Beginning of Reporting Period.....	118,279.64	
(c) Total Receipts (from Line 19) .....	19,176.0	11,617.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	120,197.24	13,202.49
7. Total Disbursements (from Line 31) .....	13,439.30	25,267.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	106,757.94	106,757.94
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	000	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	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. 06/2004)

Page 3

Write or Type Committee Name

**RYMAN HOSPITALITY PROPERTIES PAC**

Report Covering the Period:

From:

10 / 01 / 2014

To:

11 / 24 / 2014

## **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).....

128320

940033

(ii) Unitemized.....

62176

212542

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

190496

1152575

(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).....▶

190496

1152575

### 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.).....

1264

9206

### 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

000

000

(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)).....▶

191760

1161781

### 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

191760

1161781

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

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 .....	0.00	0.00
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 .....	0.00	0.00
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)) ..	1343930	2526703
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1343930	2526703

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

## **III. Net Contributions/Operating Ex- penditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

1343930
000
1343930
000
000
000

2526703
000
1343930
000
000
000

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

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

FOR LINE NUMBER: PAGE 6 OF 9  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 (Last, First, Middle Initial) <b>REED, COLIN</b>		Date of Receipt <b>11 / 24 / 2014</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>769.20</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>CEO &amp; PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>4422.69</b>

B. Full Name (Last, First, Middle Initial) <b>FIORAVANTI, MARK</b>		Date of Receipt <b>11 / 24 / 2014</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>2020.4</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 &amp; CFO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>1152.91</b>

C. Full Name (Last, First, Middle Initial) <b>LYNN, SCOTT</b>		Date of Receipt <b>11 / 24 / 2014</b>
Mailing Address <b>ONE GAYLORD DRIVE</b>		Amount of Each Receipt this Period <b>190.16</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 &amp; General Counsel</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>1085.08</b>

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

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

**1161.40**

**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

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**RYMAN HOSPITALITY PROPERTIES PAC**

Full Name (Last, First, Middle Initial)

A. **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

**RYMAN HOSPITALITY PROP**

Occupation

**VP, TAX**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**69,417**

Date of Receipt

**11 / 24 / 2014**

Amount of Each Receipt this Period

**121.80**

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

**121.80**

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

**1,283.20**

**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 **8** OF **9**

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**RYMAN HOSPITALITY PROPERTIES PAC**

Full Name (Last, First, Middle Initial)

**A. BECK, CARSON (BILL)**

Mailing Address  
**4205 GALLATIN ROAD**

City **GALLATIN** State **TN** Zip Code **37216**

Purpose of Disbursement  
**CONTRIBUTION FOR CAMPAIGN**

Candidate Name  
**CARSON (BILL) BECK**

**011**  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: **2014**  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: **TN** District: **51**

Date of Disbursement

**10 / 31 / 2014**

Amount of Each Disbursement this Period

**7400.00**

**B. MARYLANDERS FOR MILLER**

Mailing Address  
**PO BOX 219**

City **CLINTON** State **MD** Zip Code **20735**

Purpose of Disbursement  
**CONTRIBUTION FOR CAMPAIGN**

Candidate Name  
**THOMAS MILLER JR.**

**011**  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: **2014**  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: **MD** District:

Date of Disbursement

**10 / 31 / 2014**

Amount of Each Disbursement this Period

**1000.00**

**C. REITPAC**

Mailing Address  
**1875 I STREET NW, STE 600**

City **WASHINGTON** State **DC** Zip Code **20006**

Purpose of Disbursement  
**CONTRIBUTION TO PAC**

Candidate Name  
**N/A**

**011**  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For:  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: **PAC CONTRIBUTION**

Date of Disbursement

**10 / 31 / 2014**

Amount of Each Disbursement this Period

**5000.00**

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

**13400.00**

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)

PAGE 9 OF 9

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

RYMAN HOSPITALITY PROPERTIES PAC

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Disbursement	
Full Name (Last, First, Middle Initial) SUNTRUST BANK		<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/>	
Mailing Address 2503 LEBANON ROAD		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
City NASH		State TN	
Zip Code 37214			
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period	
Candidate Name		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type 0.01	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

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

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

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

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

RECEIVED  
2015 JAN -2 AM 9:14  
FEDERAL CENTER



SS

X-RAYED BY FEC SECURITY

**FedEx**

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

Origin ID: BNAA

**FedEx**  
Express



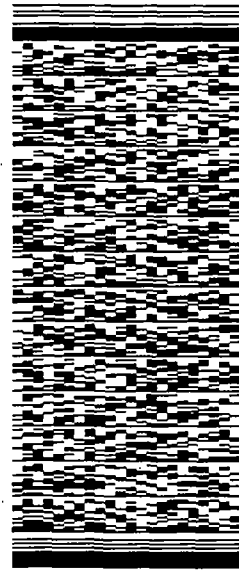
J142214082303UV

BILL SENDER

SHIP TO: (800) 424-9530

PAC Filing Department  
Federal Election Commission  
999 E. Street NW

U S GOVERNMENT OFFIC, DC 20463



FedEx Ship Manager - Print Your Label(s)

Ship Date: 31DEC14  
Act/Wgt 1.0 LB  
CAD: 1185386/NET3550

Delivery Address Bar Code



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

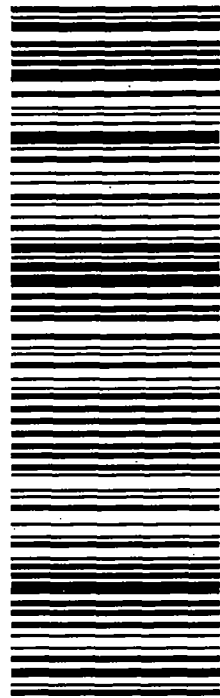
FRI - 02 JAN AA  
STANDARD OVERNIGHT

TRK# 7724 3404 8333

0201


**XC RDVA**

20463  
DC-US  
IAD



URGENT  
6177  
16:00  
8333  
01:02

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<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): <b>FEDEX</b>	
Shipping Date <b>12/3/14</b>	
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
<div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="text-align: center;"> <b>PREPARER</b> (8/2013)</div><div style="text-align: center;"><b>1/2/15</b> <b>DATE PREPARED</b></div></div>	

(8/2013)