



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**RYMAN HOSPITALITY PROPERTIES PAC**

Report Covering the Period: From:

**01 / 01 / 2024**

To:

**03 / 31 / 2024**

**COLUMN A  
This Period**

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

6. (a) Cash on Hand January 1, <b>2024</b>	<b>4348681</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>4348681</b>
(c) Total Receipts (from Line 19) .....	<b>346594</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<b>4695276</b>
7. Total Disbursements (from Line 31) .....	<b>39924</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<b>4655351</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>000</b>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>000</b>

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

2024-04-01 10:00 AM

**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: MM / DD / YYYY 01 / 01 / 2024 To: MM / DD / YYYY 03 / 31 / 2024

**I. Receipts**

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

	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).....	26,404.8	26,404.8
(ii) Unitemized.....	271.62	271.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	29,121.0	29,121.0
(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).....▶	29,121.0	29,121.0
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.).....	553.84	553.84
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)).....▶	34,659.4	34,659.4
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	34,659.4	34,659.4

NON-FEDERAL RECEIPTS

**DETAILED SUMMARY PAGE**  
of Disbursements

**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 (Including Non-Federal Donations).....	3,992.4	3,992.4
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))..	3,992.4	3,992.4
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3,992.4	3,992.4

NON-FEDERAL DISBURSEMENTS

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	2,912.10	2,912.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2,912.10	2,912.10
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

10-10-2016 10:00:00 AM

**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 10

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CHAFFIN, PATRICK</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2024</b>	
Mailing Address <b>ONE GAYLORD DRIVE</b>				
City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37214</b>	Amount of Each Receipt this Period <b>12000</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item	
Name of Employer (for Individual) <b>RYMAN HOSPITALITY PROP.</b>		Occupation (for Individual) <b>EVP &amp; COO-HOTELS</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>12000</b>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CHAMBLIN, JAMES</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2024</b>	
Mailing Address <b>ONE GAYLORD DRIVE</b>				
City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37214</b>	Amount of Each Receipt this Period <b>21876</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item	
Name of Employer (for Individual) <b>RYMAN HOSPITALITY PROP.</b>		Occupation (for Individual) <b>SVP, DESIGN &amp; CONSTR.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>21876</b>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CHERRY, SIDNEY</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2024</b>	
Mailing Address <b>ONE GAYLORD DRIVE</b>				
City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37214</b>	Amount of Each Receipt this Period <b>30576</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Memo Item	
Name of Employer (for Individual) <b>RYMAN HOSPITALITY PROP.</b>		Occupation (for Individual) <b>SVP, TAX &amp; TREAS. OPS.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>30576</b>		

SUBTOTAL of Receipts This Page (optional).....▶	<b>64452</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: PAGE 7 OF 10

(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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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 & CEO**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**230.76**

Date of Receipt

**03 / 31 / 2024**

Amount of Each Receipt this Period

**230.76**

Memo Item

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

**B. GRIMES, RON**

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)

**DIR. OF SECURITY**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**1,200.00**

Date of Receipt

**03 / 31 / 2024**

Amount of Each Receipt this Period

**1,200.00**

Memo Item

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

**C. 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)

**EVP & CFO**

Receipt For:

Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

**1,200.00**

Date of Receipt

**03 / 31 / 2024**

Amount of Each Receipt this Period

**1,200.00**

Memo Item

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

**4707.6**

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

**4707.6**

**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 10	
	<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  
**LYNN, SCOTT J.**

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 ▼  
**120.00**

Date of Receipt  
**03 / 31 / 2024**

Amount of Each Receipt this Period  
**120.00**

Memo Item

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

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) **SR. PIR. ACCT. COMP.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**131.40**

Date of Receipt  
**03 / 31 / 2024**

Amount of Each Receipt this Period  
**131.40**

Memo Item

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

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) **EXEC. CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1153.80**

Date of Receipt  
**03 / 31 / 2024**

Amount of Each Receipt this Period  
**1153.80**

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1405.20**

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

NON-FEDERAL CAMPAIGN CONTRIBUTION



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 OF 10		
	(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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NAME OF COMMITTEE (In Full)  
**RYMAN HOSPITALITY PROPERTIES PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**WEIEN, PETER J.**

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 & COO-DEG**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**120.00**

Date of Receipt  
**03 / 31 / 2024**

Amount of Each Receipt this Period  
**120.00**

Memo Item

**B.** 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

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2640.48</b>

NON-FEDERAL CAMPAIGN

**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 10 OF 10
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" 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**

**A.** Full Name (Last, First, Middle Initial)  
**BANK OF AMERICA**

Mailing Address  
**7720 LEBANON PIKE**

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

Purpose of Disbursement  
**BANK FEES** Category/Type **023**

Candidate Name

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

State: District:

Date of Disbursement  
**03 / 31 / 2024**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**399.24**

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... **399.24**

**TOTAL** This Period (last page this line number only)..... **399.24**

PRINTED AT THE GOVERNMENT PRINTING OFFICE



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
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<input type="checkbox"/> USPS First Class Mail	Date of Receipt
--	-----------------

<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	
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<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <b>FedEx</b>	Shipping Date <b>4.4.24</b>	Date of Receipt <b>4.5.24</b>
	Next Business Day Delivery	<input checked="" type="checkbox"/>

<input type="checkbox"/> Received via FAX	Date of Receipt
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<input type="checkbox"/> Received via Email	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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<b>AM</b> PREPARER	<b>4.5.24</b> DATE PREPARED
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(4/2023)

2024 APR 24 10:40 AM