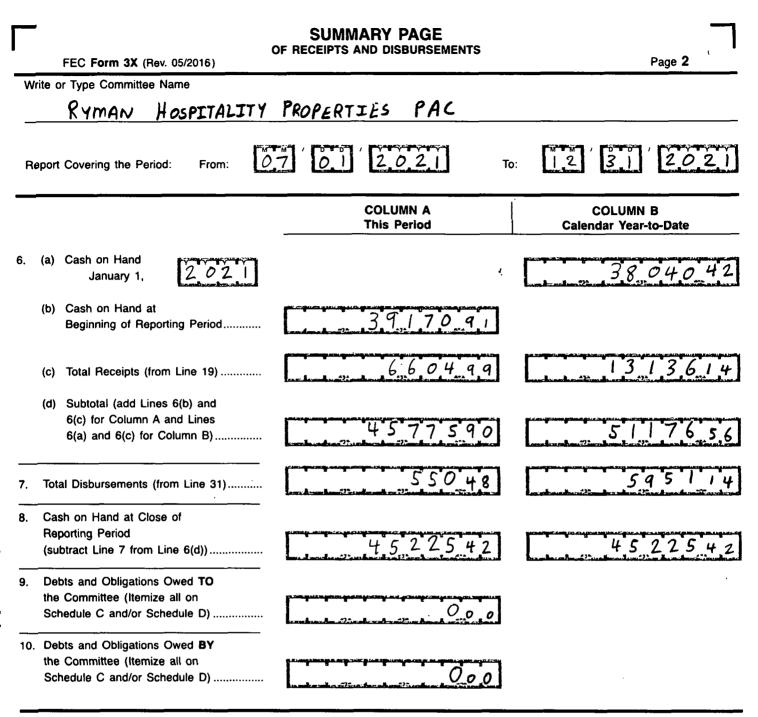
FEC FORM 3X	AND	DRT OI DISBU r Than An A	RSEN	IENT	s		•	JAN 20	MED CENTER AM 8: 32
1. NAME OF COMMITTEE (in t	TYPE OR Mill)	PRINT ¥		mple: If typi the lines.	ng, type	12FE4	.		
RYMAN H	OSPITAL	JTY	ROPL	RTI	ES P,	AC	1 1 1 1		
			<u> </u>				╂╼╍┠╌╌┠╴╹╌╍┠		
ADDRESS (number and	street)	GAYL	ORD	DRI	VE LLLL		J., J., J. J. J.		
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Check if diffe than previous reported. (AC	sty NA G	SHVJL	LE	. I . I I I		TN	372	14-	
2. FEC IDENTIFIC		,				STATE 🔺		ZIP CODE	
C001	3 7 0 7	3	. IS THIS REPORT	5 W I	NEW (N) OR	[]	AMENDED (A)		
4. TYPE OF REP (Choose One) (a) Quarterty Rep (a) Quarterty Rep (Choose One) (a) Quarterty Rep (Choose One) (a) Quarterty Rep (Choose One) (b) Quarterty Rep (Choose One) (c) Quarterty Rep (c) Quarterty C) Quarterty (c) Quarterty C) Quarterty (c) Quarterty	Re	12-Day PRE-Election	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	للسنطة يومنصح	May 20 (M5) Jun 20 (M6) Jul 20 (M7) P)		Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) eral (12G)		ov 20 (M11) on-Election ar Only) ec 20 (M12) on-Election ar Only) n 31 (YE)
Quarterh October	y Report (Q2) 15 y Report (Q3)	Report for th	6B	Convention	(12C)	Spec	cial (12S)		
January		E	ection on	10-2-W-) /				in the State of	
	Mid-Year (d) Non-election Iy) (MY)	30-Day POST-Election Report for the	and a	General (30)G)	Runc	off (30R)	Sp	ecial (30S)
Terminal (TER)	ion Report		ection on		· · · · · · · · · · · · · · · · · · ·	(*****		in the State of	
5. Covering Period	071	20	21	through	[12] ′ [3]]	20	21	
I certify that I have ea	-			-	belief it is t	rue, correc	t and comple	te.	
Type or Print Name of	of Treasurer	NNIFER	HVICH	SON					
Signature of Treasure	r <u>Je</u>	miger	Hut	heso	ን	Date [01] []	0 2	022
NOTE: Submission of	faise, erroneous, or li	ncomplete infor	nation may s	ubject the pe	arson signing	this Report	to the penalti	ies of 52 U.	S.C. § 30109.
Office Use Only								FORM Rev. 05/2010	

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

For further information contact:

Federal Election Commission 1050 First Street, N.E. 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:	7 01 2021 To	12 31 2021
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Contributions (other than loans) From: (a) Individuals/Persons Other 		· · ·
Than Political Committees (i) Itemized (use Schedule A)	6,5,0,3,9,8	1293412
(ii) Unitemized		20202
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	660499	1313614
(b) Political Party Committees	0 0 0	000
(c) Other Political Committees	and a second	and the second
(such as PACs)		000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	and a state of the second s	an a
Totals to Line 33, page 5)	660499	1313614
12. Transfers From Affiliated/Other		
Party Committees	0.0	and with the stand of the stand of the stand
13. All Loans Received	0.00	000
14 Loss Descuments Received		
 Loan Repayments Received Offsets To Operating Expenditures 	Land and the first of the land	
(Refunds, Rebates, etc.)	and almost the contract of the second s	ร้างระวังการเพื่อสาวที่สาวการเป็นการเป็นการเรียงการเรียงการได้ การเรื่องการเรื่องการเรื่องการไ
(Carry Totals to Line 37, page 5)	0.0.0	0 00
16. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees		0 00
17. Other Federal Receipts		and a description of a second s
(Dividends, Interest, etc.)	0.00	000
 18. Transfers from Non-Federal and Levin Fund (a) Non-Federal Account 		·
(a) Non-Pederal Account (from Schedule H3)		0 00
(b) Levin Funds (from Schedule H5)		000
(c) Total Transfers (add 18(a) and 18(b))		
	·· ······	
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	660499	1313614
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	6,6,0,4,9,9	1313614

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DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

II. Disbursements

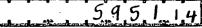
COLUMN A Total This Period

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

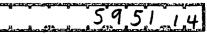
Page 4

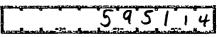
-	0	nation from a difference	iotal mis renou	Calendar tea
21.	Ope (a)	rating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4)	Contraction from the second	
		(i) Federal Share	And the design of the first of	and a surface of the day of the set
		(ii) Non-Federal Share		
	(b)	Other Federal Operating	and the second s	manter and the second second
	(0)	Expenditures		
	(c)	Total Operating Expenditures	0.00	providence to a 2 Durationalitant
	(0)	(add 21(a)(i), (a)(ii), and (b))		
22	Trar	nsfers to Affiliated/Other Party	<u></u>	marker of Paradered busi
22.		nmittees	0.0.0	
23.		tributions to	material and an and a second stand and a second stand	
		leral Candidates/Committees Other Political Committees		
24.		ependent Expenditures	an the second state of the second	Same Anna Same Standard and Anna Same
	(use	Schedule E)	0.00	
25.	Coc (52	ordinated Party Expenditures	and the set of the second s	and the second sec
	(use	U.S.C. § 30116(d)) 9 Schedule F)	000	
			and a stand of the stand of the stand of the stand	and a horan franch? Such and franch
26.	Loa	n Repayments Made		
			and the stand of t	Conduction Alter Andrew
27.	Loa	ins Made	0.0.0	
28.	Ref	unds of Contributions To: Individuals/Persons Other	man to a stand and the second stand and the second stand	and the second of the second o
	(4)	Than Political Committees	0.00	
			and could and the above of a state of the sector of the se	- Antonia to a final south on
		Political Party Committees	0.00	
	(c)	Other Political Committees	hashunder (2 maker hand 2 as to death the show	hand a second
		(such as PACs)	000	
	(d)	Total Contribution Refunds	and a second on the and and the second reaction of the second second second second second second second second	and a subscription of the
		(add Lines 28(a), (b), and (c))	O o o	
29	Oth	ner Disbursements (Including		
20.		n-Federal Donations)	55040	Construction of the second s
			5, 5, 0, 4, 8	and and some the second se
30.	Fed	deral Election Activity (52 U.S.C. § 30101	(20))	
	(a)	Allocated Federal Election Activity		•
		(from Schedule H6)		
		(i) Federal Share	Doo	
	•		purchase () under stand and and and and and	and an also the destation
		(ii) "Levin" Share	000	
	(b)	Federal Election Activity Paid	hauten and the for the stand of	and a strain the strain of the second se
		Entirely With Federal Funds	000	, , , , , , , , , , , , , , , , , , , ,
	(c)	Total Federal Election Activity (add	bandanah miling har bandan ing ang ang ang ang ang ang ang ang ang a	panyana and an and an and an and an and an and an
		Lines 30(a)(i), 30(a)(ii) and 30(b))	000	
			and have the set of the	hand and an Combandar
31.	Tot	al Disbursements (add Lines 21(c), 22,		
		, 24, 25, 26, 27, 28(d), 29 and 30(c))	55040	
			and make the structure of the start of the store of the s	and makes all modernal us
32.	Tot	al Federal Disbursements		
	(su	btract Line 21(a)(ii) and Line 30(a)(ii)	and the second state of the se	
ι	fro	m Line 31)	55040	5
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29. Other Disbursements (Including

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/

Operating Expenditures

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date

Page 5

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)

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF 2 (check only one) 11a 11b 11c 12 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions
RYMAN HOSPITI	ALITY	PROPERTIES	PAC
Full Name of Individual (Last, First, Middle Ir A. <u>REEP</u> COLIN		ومحمد الألالي ومستعلم ومسر معتمات فالتكري المتحد فيتركب والمتحد فستكري البا	Date of Receipt
Mailing Address <u>ONE</u> <u>GAYLORD</u> DRI City	VÉ State	Zip Code	12 31 2021
NASHVILLE	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	• • •	, 2,499.90
Name of Employer (for Individual) RYMAN HOSPITALITY P	ROP.	CEO	Memo Item
Receipt For:		Year-to-Date ▼	
Other (specify) ▼		, ⁴ ,999.80	
Full Name of Individual (Last, First, Middle t FIORAVANTI, MAI		Drganization Name	Date of Receipt
Mailing Address ONE GAYLORD DR City	JVÉ State	Zip Code	12 31 2021
NASHVTLLE	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		, ,499.98
Name of Employer (for Individual) RYMAN HOSPETALITY	PROP.	cupation (for Individual) CFO	Memo Item
Receipt For: Primary General Other (specify) ♥	Aggregate	• Year-to-Date ▼ , , , 996.96	6
Full Name of Individual (Last, First, Middle CHERRY, SIDNE)		Organization Name	Date of Receipt
City	DRJ VE State	Zip Code	12 31 2021
NASHVILLE	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	· · ·	, ,546.15
Name of Employer (for Individual) RYMAN HUSPITALITY Receipt For:	PROP.	cupation (for Individual) SVP, TAX e Year-to-Date ▼	Memo Item
Other (specify)	- Age gai	, 1,044.1	3
SUBTOTAL of Receipts This Page (optional).			► , <u>3</u> ,546.03
TOTAL This Period (last page this line numb	er only)		

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 0F 12 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (IN FUII) RYMAN HOSPITA	LITY_	PROPERTIES	PAC
Full Name of Individual (Last, First, Middle Ini CHAMBLIN, JAME Mailing Address	itial) or Full Or S	ganization Name	Date of Receipt
ONE GAYLORD DRI	VÉ State	Zip Code	<u>12</u> <u>31</u> <u>2021</u>
NASHVILLE	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	• •	, ,434.07
Name of Employer (for Individual)	ROP. S	vP, DESIGN & Const	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ ,, 8 51.64	
Full Name of Individual (Last, First, Middle In B. NAPIER, CRAIG	hitial) or Full Or	rganization Name	Date of Receipt
Mailing Address ONE GATLORD DR City	IVE State	Zip Code	12'31 2021
NASHVELLE	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	- · · ·	, ,265.72
Name of Employer (for Individual) RYMAN HOSPETALITY	PROP. 5	upation (for Individual) R. DIR., COMPLIANC	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , , , , , 5 2 6 .9 0	
Full Name of Individual (Last, First, Middle In C. <u>HUTCHESON</u> JENNIFE		rganization Name	Date of Receipt
City	DRJ VE State	Zip Code	12 31 2021
NASHVILLE	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Ċ	· · ·	, , , 260.00
Name of Employer (for Individual) RYMAN HUSPIT ALIIY / Receipt For:	PROP. EV	upation (for Individual) /P& こA0 Year-to-Date ▼	Memo Item
Primary General Other (specify)		, , 520.0	0
SUBTOTAL of Receipts This Page (optional)			

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CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE Ø I2 (check only one) 11a 11b 11c 12 113 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (IN FUII) RYMAN HOSPITA	ALITY	PROPERTIES	PAC
Full Name of Individual (Last, First, Middle In <u>LYNN</u> <u>SCOTI</u> Mailing Address	nitial) or Full O	rganization Name	Date of Receipt
ONE GAYLORD DRI City	VÉ State	Zip Code	12 31 ZOZI
NASHVILLE	TN	37214	Amount of Each Receipt this Period
FEC ID. number of contributing federal political committee.	C		, , , 2 60 00
Name of Employer (for Individual) RYMAN HOSPITALITY PL	ROP.	upation (for Individual) $E \vee P \mathscr{E} G C$	Memo Item
Receipt For:	1	Year-to-Date V	
Other (specify) ▼		, 520.00	· · · · · · · · · · · · · · · · · · ·
Full Name of Individual (Last, First, Middle In WETEN, PETER	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address			12 31 2021
City NASHVTLLE	State TN	Zip Code 372/4	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	H H	, , , 260.00
Name of Employer (for Individual) RYMAN HOSPETALITY		cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , ,520.00	
Full Name of Individual (Last, First, Middle I GRIMES, RON	Initial) or Full (Drganization Name	Date of Receipt
	DRJVE		1231 2021
City NASHVILLE	State TN	Zip Code 37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	· · ·	, , , Z 60. o o
Receipt For:	<u>PROP.</u>	cupation (for Individual) <u> VP_SECURITY</u> a Year-to-Date ▼	Memo Item
Primary General Other (specify)		, ,520.00	
SUBTOTAL of Receipts This Page (optional).			• , ,780.00
TOTAL This Period (last page this line number	er only)		►

Detailed Summary Page 11a 11c 12 12 15 16 17 70 7	CHEDULE A (FEC Form 3X)	Г		FOR LINE NUMBER: PAGE 9 OF 12
my information copied from such Reports and Statements may not be solid used by any person for the purpose of soliditing contribute for commercial purposes, other than using the name and address of any political committee to solidit 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 Chy AFLAY DATA To Barbor of contributing federal political committee. Name of Employer for Individual) RYMAN HOSPITALITY PROP. Ever & Cool Full Name of Individual (Last. First, Middle Initial) or Full Organization Name Chy AFLAY, AND D RIVE City MSAN VILLE To Siste Name of Employer for Individual) RYMAN HOSPITALITY PROP. Ever & Cool Full Name of Individual (Last. First, Middle Initial) or Full Organization Name BATLEY, Scott Mailing Address Chy ASHVILLE To Siste NAme of Individual (Last. First, Middle Initial) or Full Organization Name BATLEY, Scott Mailing Address Other (specify) ▼ Full Name of Individual) RYMAN HOSPITALITY PROP. Provide To Individual) RYMAN HOSPITALITY PROP. Ever & Cool Full Name of Individual (Last. First, Middle Initial) or Full Organization Name BATLEY, Scott Mailing Address Other (specify) ▼ Full Name of Individual) RYMAN HOSPITALITY PROP. Provide To Individual) RYMAN HOSPITALITY PROP. DI Cocupation (for Individual) RYMAN HOSPITALITY PROP. DI R. OPERATIONS Presipt For: Individual (Last, First, Middle Initial) or Full Organization Name Column of Employer (for Individual) RYMAN HOSPITALITY PROP. D	TEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
RYMAN HOSPITALITY PROPERTIES PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt ONE GATLORD DRIVE City ONE GATLORD DRIVE City Individual (Last, First, Middle Initial) or Full Organization To 372.14 FEC ID number of contributing C Amount of Each Receipt for: Primary General C Memo them Primary General Aggregato Year-to-Date V Memo them Primary General State Zp Code I 2 ' 0 ' V' V' Maling Address C	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and ad	not be sold or used by any dress of any political commit	y person for the purpose of soliciting contributions
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt <i>ONE GAYLORD DRTVE TN ONE GAYLORD DRTVE TN Mane Ormployer</i> (for Individual) <i>Receipt Amount General Other</i> (for Individual) <i>C Aggregate</i> YearAro-Date <i>Memo Memo Memo</i>		al ITY	PROPERTIES	PAC
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NASHVILLE TN 37214 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C , 260. Name of Employer (for Individual) RYMAN HOSPITALITY PROP. Coccupation (for Individual) EVP & COU Merro Item Primary ☐ General Other (specify) ▼ Aggregate Year-to-Date ▼ Merro Item Primary ☐ General Other (specify) ▼ State TN Z0 Code TN Date of Receipt Patient of contributing federal political committee. C Name of Individual NASHVTLLE Date of Receipt RYMAN HOSPITALITY Primary ☐ Other (specify) ▼ State TN Z12 Code TN Date of Receipt RYMAN HOSPITALITY Primary ☐ Other (specify) ▼ C Merro Item Merro Item CLIER OF Individual RYMAN HOSPITALITY PROP. PRESTOENT, 0EC TABEGGIF FOT: ONE Cocupation (for Individual) RYMAN HOSPITALITY PROP. PRESTOENT, 0EC TABEGGIF FOT: Primary ☐ Other (specify) ▼ Date of Receipt Nerro Item Mailing Address ONE CAYLORO DRIVE CIV TN 37214 Amount of Each Receipt Itis Period Mailing Address ONE CAYLORO DRIVE CIV TN 37214 Amount of Each Receipt Itis Period Mailing Address ONE CAYLORO	Mailing Address ONE GAYLORD DRI		1	-
tederal political committee. , , , , , , , , , , , , , , , , , , ,				Amount of Each Receipt this Period
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Primary General Progregative found of the order order orde order of the order of the order of the o	RYMAN HOSPITALITY PI	ROP. E	VP & COO	Memo Item
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City Image: State of the specify of the specific the		nitial) or Full Or	ganization Name	Date of Receipt
NASHVTLLE TN 37214 FEC ID number of contributing tederal political committee. C Amount of Each Receipt this Period , 260, a Name of Employer (for Individual) RYMAN HOSPTTALITY Primary General Other (specify) ▼ Occupation (for Individual) PRESIDENT, 0EC Aggregate Year-to-Date ▼ Memo Item Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Memo Item Mailing Address ONE CAYLORD DRJVE City NASHVTLLE State TN Zip Code TN Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Memo Item Receipt For: Primary General C Amount of Each Receipt this Period Receipt For: Primary General C Memo Item Name of Employer (for Individual) RYMAN HOSPITALITY PROP. Occupation (for Individual) DIR. Memo Item Receipt For: Primary General Aggregate Year-to-Date ▼ Memo Item Magregate Year-to-Date ▼ , 3 6 2 . 0 6 Memo Item	Mailing Address ONE GAYLORD DRIVE			12 31 2021
PEC ID number of contributing federal political committee. C , 260, c Name of Employer (for Individual) Receipt For: Other (specify) ▼ Occupation (for Individual) PRESIDENT, OEG Memo Item Full Name of Individual (Last, First, Middle Initial) or Full Organization Name COLLIER, DAVID Date of Receipt Mailing Address ONE GAYLORD DRIVE Date of Receipt City NASHVILLE State TN 37214 Amount of Each Receipt this Period , 12 31 20 2 FEC ID number of contributing federal political committee. C , 182. Name of Employer (for Individual) RYMAM HUSPITALITY PROP. Occupation (for Individual) DIR., OPERATIONS Memo Item Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Memo Item				Amount of Each Receipt this Period
RYMAN HosPTIALITY PROP. PRESIDENT, OEG Receipt For: Aggregate Year-to-Date \checkmark Aggregate Year-to-Date \checkmark Description Primary General Aggregate Year-to-Date \checkmark Date of Receipt Mailing Address ONE GAYLORD DRJVE City ONE GAYLORD DRJVE City State Zip Code TN FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer (for Individual) C DIR., OPERATIONS Memo Item Receipt For: Aggregate Year-to-Date \checkmark , 3 6 2 . 0 6 Memo Item	-	С.	· · · · ·	26000
Primary General Other (specify) ▼ , 520.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Coll IER, DAVID DRIVE Mailing Address ONE ONE GAYLORD ORIVE State Zip Code I TN 37214 Amount of Each Receipt this Period FEC ID number of contributing C rederat political committee. C Name of Employer (for Individual) DIR., OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) , 362.06	RYMAN HOSPETALITY		· · ·	Memo Item
COLLIER, DAVID Date of Receipt Mailing Address ONE GAYLORD DRJVE City State Zip Code 1 2 3 1 20 2 KYMAN Mailing Address Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C , , 82 Name of Employer (for Individual) C JIR., OPERATIONS RYMAN HOSPITALTIY PROP. DIR., OPERATIONS Memo Item Primary General Aggregate Year-to-Date ▼ , 362.06	Primary General		• • • • •	0
ONE GAYLORD DRJVE I 2 31 202 City NASHVTLLE State Zip Code TN 37214 Amount of Each Receipt this Period FEC ID number of contributing C , , 82 federal political committee. C , , 82 Name of Employer (for Individual) Occupation (for Individual) Memo Item RymAn HUSPITALITY PROP. DIR. OPERATIONS Receipt For: Primary General Aggregate Year-to-Date ▼ Other (specify) , , 362.06 Amount of Each Receipt Committee		nitial) or Full O	rganization Name	Date of Receipt
NASHVTLLE TN 37214 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C , , , 82. Name of Employer (for Individual) Occupation (for Individual) Memo Item RYMAN HOSPITALITY PROP. OLR. OPERATIONS Memo Item Primary General Aggregate Year-to-Date ▼ , , 362.06	ONE GAYLORD		7-0-4-	12 31 2021
federal political committee. , , , 82 Name of Employer (for Individual) Occupation (for Individual) RYMAN HOSPITALITY PROP. DIR., OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) , , 362.06	NASHVILLE	1		Amount of Each Receipt this Period
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Primary General Other (specify) , , 362.06	RYMAN HUSPITALITY	<u>PROP.</u> D	IR., OPERATION	
SUBTOTAL of Receipts This Page (optional)	Primary General	Aggregate		6
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 12 (check only one) 11a 11a 11b 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an NAME OF COMMITTEE (In Full)	d address of any political committee	e to solicit contributions from such committee.
RYMAN HOSPITALITY PROP.	Il Organization Name	Date of Receipt
FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RYMAN HOSPETALITY PROP.		Date of Receipt 12312021 Amount of Each Receipt this Period 130.00 Memo Item
FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RYMAN HUSPITALITY PROP.	É	Date of Receipt 12312021 Amount of Each Receipt this Period , , 13000 Memo Item
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FEC Schedule A (Form 3X) Rev. 05/2016

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE // OF /Z (check only one) 11a 11a 11b 13 14 15 16
ny information copied from such Reports and	d Statements mathematications and a	ay not be sold or used by any pound of the sold or used by any political committee	erson for the purpose of soliciting contributions a to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
RYMAN HOSPIT	ALITY	PROPERTIES 1	°Ac
Full Name of Individual (Last, First, Middle			
HANTON, JEFF Mailing Address			
ONE GAYLORD DRI			2 31 2021
City NASHVILLE	State	Zip Code 37214	Amount of Each Receipt this Period
FEC ID number of contributing	<u>с</u>		
federal political committee.			1 1 2 7 0
Name of Employer (for Individual)	PROP.	mGR. ACCT	Memo Item
RYMAN HOSPITALITY Receipt For:		Year-to-Date V	
Primary General		- en roll in monthe dir if, indemicant	-
Other (specify) ▼		, 249.43	
Full Name of Individual (Last, First, Middle	Initial) or Full (Drganization Name	
		·	Date of Receipt
Mailing Address			M 971117 / D 37D* / , Y* Y 3777*****
City	State	Zip Code	
			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	ng ka na ka na a	
		evention (for ladicidual)	Memo Item
Name of Employer (for Individual)		cupation (for Individual)	
Receipt For:	Aggregate	e Year-to-Date ▼	1
Primary General Other (specify) ▼		n tu Sonan tu na cumunu - Culo casa cu s L	
	·		
Full Name of Individual (Last, First, Middle	Initial) or Full	Organization Name	
Mailing Address			Date of Receipt
			`M J™M" / D'/"D / "Y J'Y" - Y J"Y"
City	State	Zip Code	
		<u>·</u> ·	Amount of Each Receipt this Period
C ID number of contributing C deral political committee.		······································	
Name of Employer (for Individual)			Memo Item
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify)			
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EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 28a	
hy information copied from such Reports and States for commercial purposes, other than using the nar	L ments may not be sold or use ne and address of any politica	d by any person clommittee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
RYMAN HOSPITALIT	TY PROPERTS	ES PA	IC
Full Name (Last, First, Middle Initial)			Date of Disbursement
	SERNJ GAN		11182021
Mailing Address 4847 RAINER DRIV	£		
City OLD HICKORY	State Zip Code TN 37138		FEC Identification Number
Purpose of Disbursement	· · · · · · · · · · · · · · · · ·		С
CAMPAIGN CONTRIBUT	TON	011	American at the Distribution and this Deviced
DARREN JERNIGAN		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For: Primary General		,250.00
President	Other (specify) V		Memo Item
State: TN District: 60	-		Mono nen فت
Full Name (Last, First, Middle Initial)			Date of Disbursement
BANK OF AMERICA			12 31 2021
Mailing Address 2720 LEBANUN PIK	E		16 31 2021
City NASHVILLE	State Zip Code TN 3721	+	FEC Identification Number
Purpose of Disbursement BANK FEES		023	С
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For:	Туре	30 0.48
Senate	Primary General		
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
			Date of Disbursement
Mailing Address	- · · · · · · · · · · · · · · · · · · ·		
City	State Zip Code		FEC Identification Number
Purpose of Disbursement		· · ··	(C)
Candidate Name	······	Cotorori	Amount of Each Disbursement this Period
		Category/ Type	
Office Sought: House Disburse Disburse	ement For: Primary		······································
President	Other (specify) ▼		Memo Item
State: District:			·····
SUBTOTAL of Disbursements This Page (optional)		•••••••	<u>550_48</u> 550_48
		<u>_</u>	55040
OTAL This Period (last page this line number on	y)	····· •	

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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.

Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
, USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify): Fed EX Next Business	Shipping Date /////22 Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
PREPARER	1/24/22 DATE PREPARED
(3/2015)	

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