

# FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

| OMB APPROVAL                                   |           |
|--|-----------|
| OMB Number:                                    | 3235-0287 |
| Estimated average burden hours per response... | 0.5       |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

|  |         |   |  |   |   |
|--|---------|---|--|---|---|
| 1. Name and Address of Reporting Person *<br>Yoo K. Phil |         | 2. Issuer Name and Ticker or Trading Symbol<br>ANTERO RESOURCES Corp [AR] |  | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner<br><input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) |   |
| (Last)   | (First) | (Middle)  | 3. Date of Earliest Transaction (Month/Day/Year)<br>04/15/2016 |   | See Remarks   |
| 1615 WYNKOOP STREET                                      |         |   |  |   |   |
| (Street)   |         |   | 4. If Amendment, Date Original Filed(Month/Day/Year)           |   | 6. Individual or Joint/Group Filing(Check Applicable Line)<br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> Form filed by More than One Reporting Person |
| DENVER, CO 80202   |         |   |  |   |   |
| (City)   |         |   | (State)  |   |   |
| (Zip)  |         |   |  |   |   |

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3)          | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) |   | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |            |          | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|--------------------------------------|--|--------------------------------|---|---|------------|----------|---|--|---|
|  |                                      |  | Code                           | V | Amount  | (A) or (D) | Price    |   |  |   |
| Common stock, par value \$0.01 per share | 04/15/2016                           |  | F                              |   | 1,160<br><u>(1)</u>   | D          | \$ 26.84 | 97,370 <u>(2)</u>   | D  |   |
| Common stock, par value \$0.01 per share | 04/15/2016                           |  | A                              |   | 7,452<br><u>(3)</u>   | A          | \$ 0     | 104,822 <u>(2)</u>  | D  |   |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. SEC 1474 (9-02)

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) |                 | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|--|--------------------------------------|--|--------------------------------|---|---|--|-----------------|---|--|--|--|--|
|  |  |                                      |  | Code                           | V |   | Date Exercisable   | Expiration Date |   |  |  |  |  |

## Reporting Owners

| Reporting Owner Name / Address                         | Relationships |           |             |       |
|--|---------------|-----------|-------------|-------|
|  | Director      | 10% Owner | Officer     | Other |
| Yoo K. Phil<br>1615 WYNKOOP STREET<br>DENVER, CO 80202 |               |           | See Remarks |       |

## Signatures

|  |            |
|--|------------|
| /s/ Alwyn A. Schopp, as attorney-in-fact for K. Phil Yoo | 04/19/2016 |
| Signature of Reporting Person                            | Date       |

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

In connection with the vesting of restricted stock units pursuant to the Antero Resources Corporation Long-Term Incentive Plan, the Issuer withheld shares that would otherwise have been issued to the Reporting Person to satisfy its tax withholding obligations. The number of shares withheld was determined based on the closing price per share on April 15, 2016.

(2) Includes 62,290 shares of common stock subject to previously granted restricted stock unit awards that remain subject to vesting.

(3) Common stock subject to a restricted stock unit award that vests in four equal installments on the first four anniversaries of the grant date so long as the Reporting Person remains continuously employed by the Issuer through each such anniversary date.

**Remarks:**

Vice President - Accounting, Chief Accounting Officer and Corporate Controller

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.