FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 Ty	pe Response	s)													
1. Name and Address of Reporting Person * ROBESON ROSE M				2. Issuer Name and Ticker or Trading Symbol Antero Midstream Corp [AM]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 1615 WYNKOOP STREET				3. Date of Earliest Transaction (Month/Day/Year) 10/10/2019						Office	r (give title belo	ow)	Other (specify b	elow)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
DENVE	R, CO 802	02											one responding	. 015011	
(City)	(State)	(Zip)	T	able I	- Non	-Deriv	ative	Securities	Acqu	ired, Dispo	osed of, or I	Beneficially	Owned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)		f Code (Instr. 8)		4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5)		of (D)	Beneficia	unt of Securities fally Owned Following d Transaction(s)		6. Ownership Form:	7. Nature of Indirect Beneficial		
				(Month/Day/Year		ode	V	Amoui	(A) or	Price	(Instr. 3 a	nd 4)		\ /	Ownership (Instr. 4)
Common stock, par value \$0.01 per share		10/10/2019			A			\$ 0	19,186		D				
				Derivative Securit		t quire	contai the for d, Disp	ned i rm dis	n this for splays a of, or Ben	rm are curre	e not requently valid	OMB conf	ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2	3. Transaction	· ·	4.	5.				cisable		itle and	8 Price of	9. Number	of 10.	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative Security		Execution Da	, if Transaction Number Of		eative ratives ired rosed) . 3,	and Expiration Date (Month/Day/Year)			Am Uno Sec	ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)		Ownersh Form of Derivati Security Direct (I or Indire	nip of Indirect Beneficia Ownershi (Instr. 4)
				Code V	(A)		Date Exerci	sable	Expiration Date	n Titl	Amount or e Number of Shares				

Reporting Owners

D 4 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ROBESON ROSE M 1615 WYNKOOP STREET DENVER, CO 80202	X						

Signatures

/s/ Alvyn A. Schopp, as attorney-in-fact for Rose M. Robeson	10/15/2019
**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).

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.