FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
nours per response	e 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

1 Name ar	pe Responses													
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					
1615 WY	t) YNKOOP S	(First) STREET	(Middle)	3. Date of Earliest 10/10/2020	rnest Transaction (Month/Day/ Year)			other (specify b	elow)					
(Street) DENVER, CO 80202			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Dispo					osed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	() - F		of (D)	D) Beneficially Owned Following Reported Transaction(s)		ollowing (s)	Ownership of Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4) Direct (D) or Indirect (I) (Instr. 4)		or Indirect	Ownership (Instr. 4)	
Common \$0.01 per	n stock, par r share	value	10/10/2020		A		5,481	A	\$ 0	41,416			D	
Common \$0.01 per	n stock, par r share	value	01/10/2021		A		4,022	A	\$ 0	45,438			D	
						cont	ained in	this for	m are	not requ		pond unles		1474 (9-02)
				Derivative Securiti	ies Acquire	ed, Di	sposed o	f, or Ben	eficial		OMB con	rol number		
			(e.g., puts, calls, wa	es Acquire	ed, Di tions,	sposed o	f, or Ben	eficial rities)	ly Owned				
	Conversion	3. Transaction Date (Month/Day/Y	n 3A. Deemed Execution Dar any	e.g., puts, calls, wa 4. Transaction Code (ear) (Instr. 8)	ies Acquire arrants, op	ed, Di tions, 6. Da and I	sposed o	f, or Ben ible secur isable n Date	7. Ti Amo			9. Number o	f 10. Ownersl Form of Derivati Security Direct (l or Indire	Benefic: Owners! (Instr. 4

Reporting Owners

D 41 0 N /	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-f	act for Rose M. Robeson	01/12/2021
**Signature of Reporting F	'erson	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.