## Edgar Filing: Maxwell Greg G - Form 4

| Form 4                                                                                                                                                                                                                                                                     | C                                      |                                                               |                                                                               |                                         |                                       |        |                |                                                                                                                                         |                                                                      |                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------|--------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------|--|
| July 10, 2018                                                                                                                                                                                                                                                              |                                        |                                                               |                                                                               |                                         |                                       |        |                | OMB APPROVAL                                                                                                                            |                                                                      |                      |  |
|                                                                                                                                                                                                                                                                            | Washington, D.C. 20549                 |                                                               |                                                                               |                                         |                                       |        | OMB<br>Number: | 3235-0287                                                                                                                               |                                                                      |                      |  |
| Check thi<br>if no long<br>subject to<br>Section 10<br>Form 4 or                                                                                                                                                                                                           | er <b>STATE</b><br>6.                  | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |                                                                               |                                         |                                       |        |                |                                                                                                                                         | Expires:<br>Estimated a<br>burden hou<br>response                    |                      |  |
| Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |                                        |                                                               |                                                                               |                                         |                                       |        |                |                                                                                                                                         |                                                                      |                      |  |
| (Print or Type R                                                                                                                                                                                                                                                           | Responses)                             |                                                               |                                                                               |                                         |                                       |        |                |                                                                                                                                         |                                                                      |                      |  |
|                                                                                                                                                                                                                                                                            |                                        |                                                               | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>RANGE RESOURCES CORP |                                         |                                       |        | -              | 5. Relationship of Reporting Person(s) to Issuer                                                                                        |                                                                      |                      |  |
|                                                                                                                                                                                                                                                                            |                                        |                                                               | [RRC]                                                                         |                                         |                                       |        |                | (Chec                                                                                                                                   | k all applicable                                                     | :)                   |  |
| (Last)<br>100 THROC<br>STREET, SU                                                                                                                                                                                                                                          | CKMORTON                               | (Middle)                                                      | 3. Date of<br>(Month/D<br>07/06/20                                            |                                         | ransaction                            |        |                | X Director<br>Officer (give<br>below)                                                                                                   |                                                                      | Owner<br>er (specify |  |
|                                                                                                                                                                                                                                                                            |                                        |                                                               |                                                                               | endment, Date Original<br>nth/Day/Year) |                                       |        |                | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul> |                                                                      |                      |  |
| FORT WOR                                                                                                                                                                                                                                                                   | TH, TX 76102                           |                                                               |                                                                               |                                         |                                       |        |                |                                                                                                                                         | Iore than One Re                                                     |                      |  |
| (City)                                                                                                                                                                                                                                                                     | (State)                                | (Zip)                                                         | Tabl                                                                          | e I - Non-I                             | Derivative                            | Secur  | ities Acq      | uired, Disposed of                                                                                                                      | f, or Beneficial                                                     | ly Owned             |  |
| 1.Title of<br>Security<br>(Instr. 3)                                                                                                                                                                                                                                       | 2. Transaction Dat<br>(Month/Day/Year) | ) Executio<br>any                                             | ned<br>n Date, if<br>Day/Year)                                                | Code<br>(Instr. 8)                      | 4. Securi<br>on(A) or D<br>(Instr. 3, | ispose | d of (D)       | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)                      | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |                      |  |
| Common<br>Stock                                                                                                                                                                                                                                                            | 07/06/2018                             |                                                               |                                                                               | А                                       | 7,030<br>(1)                          | А      | \$<br>17.07    | 43,790                                                                                                                                  | 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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | ınt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                 | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

## **Reporting Owners**

| Relationships |  |  |  |  |  |  |
|---------------|--|--|--|--|--|--|
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## **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).
- (1) Grant of restricted stock is approved by the Compensation Committee of the Board of Directors for no consideration. Grants are 100% vested on the date of grant.

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.