FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL |
|---|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
| l | Estimated average burde | en |
| l | 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).

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 an | | 2. Issuer Name and Ticker or Trading Symbol RANGE RESOURCES CORP [RRC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | | | | | |
| PINKE | RTON JO | 1 | TELLICE TELEGOTION COTT | | | | | | | | | Direc | ctor | | | .0% O | wner | | | | | |
| | | | | | | 2. Data of Farlingt Transportion (Marth/Day/Mart) | | | | | | | | | Office below | er (give | e title | | | | | |
| (Last) (First) (Middle) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/20/2014 | | | | | | | | | N) | | D | elow) | | | |
| C/O RANGE RESOURCES CORPORATION | | | | | | | | | | | | | | | | | | | | | | |
| 100 THROCKMORTON, SUITE 1200 | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | | | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | | | |
| FORT WORTH TX 76102 | | | | | | | | | | | | | | Form filed by More than One Reporting | | | | | | | | |
| | | | | | | | | | | | | | Person | | | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - | Non-Deriv | /ative | e Sec | uritie | s Ac | quii | red, I | Disposed (| of, or | Benefic | ially | y Owne | ed | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date | | | | | | 2A. Deemed Execution Date, | | 3. Tr | 3. Transaction | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | | Amount o | 6. Ownership Form: Direct | | 7. Nature of Indirect | | | | |
| (Month/D | | | | | 'ear) i | | | Co | Code (Instr. | | 5) | | | Be | eneficially wned Follo | | (D) or Indirect | | Beneficial Ownership (Instr. | | | |
| | | | , | | Co | ode | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | 4) | | | | | | | |
| | | | | | _ | | | _ | | | | (5) | | 1, | isti. S and | -, | | - | D-f- | | | |
| Common Stock | | | | 05/20/2014 | | | | | A | | 37,604(1) | A | \$88.58 | 8 899,928 | | 28 | | | Deferred Compensation Account | | | |
| Common | Otock | 05/20/20 | - | | | | " | | 37,004 | μ ψου.5 | | -0 | | | | | | | | | | |
| | | | | | \dashv | | | + | | | | | | + | | | | _ | Dofo | mo d | | |
| Common Stock | | | | 05/20/2014 | | | | | A | | 2,822(1) | A | \$88.58 | 902,750 | | | | Deferred Compensation | | | | |
| Common | 03/20/2014 | | | | | ' | | 2,022 | '` | Ψοσ.σσ | | 302,730 | | • | | Account | | | | | | |
| Common Stock | | | | | | | | | | | | | | ╁ | 1,002,1 | 80 | D | _ | | | | |
| | | | | | | + | | | ++ | | | | | + | | | - | | 401(lr) Dlan | | | |
| Common Stock | | | | | | | | | $-\!\!+\!\!-\!\!\!-$ | | | | | | 27,841 | | I | | 401(k) Plan | | | |
| Children's Holdings | | | | | | | | | | | | | | 7,158 | | 3 | I | | children | | | |
| IRA | | | | | | | | | | | | | | 181,798 | | 98 | I | | IRA | | | |
| Spouse Holdings | | | | | | | | | | | | | | 5,248 | | 3 | I | | Spouse | | | |
| | | Ta | able | II - Deriva | | | | | | | | | | | Owned | | | | | | | |
| | | | | (e.g., p | uts, | calls, | warra | ants, | opt | tions | s, converti | ble se | curities | 5) | | | | | | | | |
| 1. Title of Derivative | 2. Conversion | 3. Transaction Date | Deemed cution Date, | 4. Trans | action | 5. Nui | mber | er 6. Date Exercisable a | | | 7. Title and Amount of | | 8. Price of Derivative | | 9. Nur deriva | nber of | 10. Ownership | | 11. Nature of Indirect | | | |
| Security (Instr. 3) | or Exercise Price of | (Month/Day/Year) | if ar | ıy [′] | Code 8) | | Deriva | | | | y/Year) | Securities Underlying | | Security (Instr. 5) | | Secur | ities | Form: Direct (D) | ١. | Beneficial Ownership | | |
| (iiisti. 3) | Derivative | | (IVIO | | 0) | | Acqui | ired | | | | Deriv | ative | - 1 | 15(1. 5) | Owne | d Í | or Indi | rect | (Instr. 4) | | |
| Security | | | | | | | (A) or Dispo | sed | | | | Security (Instr. and 4) | | 3 | | Follov Repor | ted | (I) (Instr. 4) | | | | |
| | | | | | | of (D) (Instr. | 3, 4 | | | | | | | | Transaction(s) (Instr. 4) | | | | | | | |
| | | | | | and 5) | |) | | | _ | | | 4 | | , , | | | | | | | |
| | | | | | | | | | | | | | Amount | : | | | | | | | | |
| | | | | | | | | | Date | | Expiration | | Number | | | | | | | | | |
| | | | | | Code | v | (A) | (D) | | rcisab | | Title | Shares | | | | | | | | | |

Explanation of Responses:

1. Grant of restricted stock into the Deferred Compensation Plan approved by the Compensation Committee of the Board of Directors for no consideration. Grants are 100% vested on the date of grant.

Rodney L. Waller by Power of

05/22/2014

** Signature of Reporting Person

Date

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

- * 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.

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 Number.