FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

Carter Thomas L Jr					Black Stone Minerals, L.P. [BSM]									neck all app	Owner			
(Last) (First) (Middle) 1001 FANNIN STREET, SUITE 2020					3. Date of Earliest Transaction (Month/Day/Year) 02/07/2019									A belo	,			ner (specify ow) rman
(Street)			77002	4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	Individual or Joint/Group Filing (Check Application) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St		Zip)	i votive		uritio	- Λο	auiro	4 D:	eneced o	f or F	lono	ficio	Illy Own				
L. Title of Security (Instr. 3)		2. Transa Date (Month/D	ction	n 2A. Deemed Execution Date,	3. 4. Secur			sed of, or Beneficia ecurities Acquired (A) or losed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) o (D)	r _{Pr}	ice	Reported Transaction(s) (Instr. 3 and 4)				nstr. 4)		
Common interests	units repres	senting limited p	artner 02/07	/2019				A ⁽¹⁾		152,135	A	\$	0.00	937	,643		D	
Common interests	units repres	senting limited p	artner											30,	289		I I	By Georgia Elizabeth Carter 1995 Crust
Common interests	units repres	senting limited p	artner											30,	289		I I	By Katherine Ross Carter 995 Trust
Common interests	units repres	senting limited p	artner											30,	290		I I	By Molly Leachman Carter 1995 Trust
Common interests	units repres	senting limited p	artner											5,0	689		I	By Fowler Thomas Carter 1995 Trust
Common interests	units repres	senting limited p	artner											4,970,834			I	By Carter2221, Ltd.
Common interests	units repres	senting limited p	artner											27,663			I I	By spouse
Common interests	mmon units representing limited partner erests		artner											123,222			I I	By GRAT
Common interests	ommon units representing limited partner erests													123,222				By spouse's GRAT
		Та	ble II - Deriva) e.g., ړ							osed of, convertib			•	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exec (Month/Day/Year) if any	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa	nsaction de (Instr. 1		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exerci:	sable	Expiration Date								

Explanation of Responses:

by the Issuer, Black Stone Minerals GP, L.L.C. (the "General Partner"), or any of their respective affiliates through each such vesting date.

Remarks:

/s/ Steve Putman, attorney-infact for Thomas L. Carter, Jr. 02/11/2019

** 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.