## 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 burd	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

Name and Address of Reporting Person*  DeWalch D Mark						2. Issuer Name <b>and</b> Ticker or Trading Symbol Black Stone Minerals, L.P. [ BSM ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Dewalch D Mark														_		Direc Office	tor er (give title	10% (	Owner (specify		
(Last) (First) (Middle) 1001 FANNIN STREET, SUITE 2020						3. Date of Earliest Transaction (Month/Day/Year) 06/10/2019											belov		below		
							endme	nt, Da	e o	f Origina	al File	d (Month/Da	ay/Yea	.)		6. Individual or Joint/Group Filing (Check Applicable					
(Street)																Line)  X Form filed by One Reporting Person					
HOUSTON TX 77002						Form filed by One Reporting Person  Form filed by More than One Reporting Person															
(City)	(St	ate) (	Zip)																		
		Tabl	e I - No	n-Deriv	ative	Se	ecurit	ies A	\cc	quired	, Dis	posed o	f, or	Bene	ficia	lly O	wne	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						r)   E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code ( 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				and 5) Secur Benef Owne		ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) (D)	or F	rice	1		ted action(s) 3 and 4)		(Instr. 4)	
Common units representing limited partner interests 06/10/20										P		5,350	1	A   S	816.4	<b>4</b> <sup>(1)</sup>	40,809		I	By Donald Mark DeWalch Trust	
Common units representing limited partner interests																	17	74,272	D		
Common units representing limited partner interests																	(	5,749	I	By wife	
Common units representing limited partner interests																	1	0,317	I	By daughter	
		Та										osed of, onvertib				Owi	ned	,		,	
1. Title of Derivative Security (Instr. 3)	tive ty Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Picce of Derivative Security				saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares			-		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These common units were purchased in multiple transactions at prices ranging from \$16.42 to \$16.45, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of common units purchased at each separate price within the ranges set forth in this footnote.

## Remarks:

/s/ Steve Putman, attorney-infact for D. Mark DeWalch

06/12/2019

\*\* 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.