The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL

OMB Number: 3235-0076
Estimated average burden
hours per response: 4.00

CIK (Filer ID Number) Previous Names Names Names None Names TXO Energy Partners, L.P. MomingStar Partners, L.P. MomingStar Partners, L.P. I Limited Partnership Limited Partnership Limited Liability Company Detation of Incorporation/Organization Detation of Incorporation/Organization Within Last Five Years Ago Within Last Five Years (Specify Year) Yet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 Street Address 2 400 WEST 7TH STREET City State/Province/Country TEXAS 3. Related Persons Last Name First Name Niddle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country TEXAS 3. Related Persons Last Name First Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country TEXAS Texas Time Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 City State/Province/Country TEXAS TEXAS TEXAS Total TEXAS TOTA								
Name of Issuer Street Address 1 Street Address 2	1. Issuer's Identity							
Name of Issuer TXO Partners, L.P. Variance of Issuer NomingStar Partners, L.P. Variance, L.P. Variance, L.P. Variance of Incorporation/Organization DELAWARE Year of Incorporation/Organization Within Last Five Years Ago Within Last Five Years (Specify Year) Vet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 Street Address 2 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 State/Province/Country ZIP/PostalCode TEXAS 76102 Clarification of Response (if Necessary):	CIK (Filer ID Number)		None	Entity Type				
Name of Issuer NormingStar Partners, L.P. Limited Partnership Limited Liability Company	0001559432	TXO Energy	Partners, L.P.	Corporation				
TXO Partners, L.P. Unrisdiction of Incorporation/Organization DELAWARE Year of Incorporation/Organization Within Last Five Years (Specify Year) Vet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 Street Address 2 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 8. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Phone Number of Issuer First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	Name of Issuer	MorningStar	Partners, L.P.					
DELAWARE Year of Incorporation/Organization DELAWARE Year of Incorporation/Organization Over Five Years Ago Other (Specify) Within Last Five Years (Specify Year) Yet to Be Formed Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 Street Address 2 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Phone Number of Issuer TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: XI Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	TXO Partners, L.P.			H '				
Year of Incorporation/Organization Over Five Years Ago Within Last Five Years (Specify Year) Yet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Phone Number of Issuer TXO Partners GP, LLC N/A Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: XI Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	Jurisdiction of Incorporation/Organi	ization						
Over Five Years Ago	DELAWARE			General Partnership				
Within Last Five Years (Specify Year) Yet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Phone Number of Issuer First Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	Year of Incorporation/Organization			Business Trust				
Within Last Five Years (Specify Year) Yet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Street Address 7 Street Address 8 Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	X Over Five Years Ago			Other (Specify)				
2. Principal Place of Business and Contact Information Name of Issuer TXO Partners, L.P. Street Address 1 400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Clarification of Response (if Necessary): General Partner of the Issuer								
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TXO Partners, L.P. Street Address 1 400 WEST 7TH STREET City State/Province/Country 76102 SIT-334-7800 S.Related Persons Last Name First Name TXO Partners GP, LLC Street Address 2 400 West 7th Street City State/Province/Country TXO Partners GP, LLC Street Address 1 400 West 7th Street City State/Province/Country TEXAS	2. Principal Place of Business an	d Contact Information						
TXO Partners, L.P. Street Address 1 400 WEST 7TH STREET City State/Province/Country 76102 SIT-334-7800 S.Related Persons Last Name First Name TXO Partners GP, LLC Street Address 2 400 West 7th Street City State/Province/Country TXO Partners GP, LLC Street Address 1 400 West 7th Street City State/Province/Country TEXAS	Name of Issuer							
400 WEST 7TH STREET City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	TXO Partners, L.P.							
City State/Province/Country ZIP/PostalCode Phone Number of Issuer FORT WORTH TEXAS 76102 817-334-7800 3. Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	Street Address 1		Street Address 2					
Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	400 WEST 7TH STREET							
Related Persons Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer				
Last Name First Name Middle Name TXO Partners GP, LLC N/A Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	FORT WORTH		76102	817-334-7800				
TXO Partners GP, LLC Street Address 1 Street Address 2 400 West 7th Street City State/Province/Country Fort Worth TEXAS Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	3. Related Persons							
Street Address 1 400 West 7th Street City State/Province/Country Fort Worth TEXAS Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	Last Name	First Name		Middle Name				
400 West 7th Street City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	TXO Partners GP, LLC	N/A						
City State/Province/Country ZIP/PostalCode Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	Street Address 1	Street Address 2						
Fort Worth TEXAS 76102 Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	400 West 7th Street							
Relationship: X Executive Officer Director Promoter Clarification of Response (if Necessary): General Partner of the Issuer	•	State/Province/Country		ZIP/PostalCode				
Clarification of Response (if Necessary): General Partner of the Issuer	Fort Worth	TEXAS		76102				
General Partner of the Issuer	Relationship: X Executive Officer	Director Promoter						
	Clarification of Response (if Necess	sary):						
). Industry Group	General Partner of the Issuer							
	4 Industry Group							

Agriculture	Health Care	Retailing			
Banking & Financial Services	Biotechnology				
Commercial Banking	Health Insurance	Restaurants			
Insurance		Technology Computers			
Investing	Hospitals & Physicians				
Investment Banking	Pharmaceuticals	Telecommunications			
Pooled Investment Fund	Other Health Care	Other Technology			
Is the issuer registered as	Manufacturing	Travel			
an investment company under the Investment Company	Real Estate	Airlines & Airports			
Act of 1940?	Commercial	Lodging & Conventions			
Yes No	Construction	Tourism & Travel Services			
Other Banking & Financial Services	☐ REITS & Finance				
_		Other Travel			
Business Services	Residential				
Energy		Other			
Coal Mining	Other Real Estate				
Electric Utilities					
Energy Conservation					
Environmental Services					
X Oil & Gas					
Other Energy					
5. Issuer Size					
Revenue Range OR		Asset Value Range			
No Revenues	No Aggregate	e Net Asset Value			
\$1 - \$1,000,000	<u> </u> \$1 - \$5,000,0				
\$1,000,001 - \$5,000,000	\$5,000,001 -				
\$5,000,001 - \$25,000,000	H	- \$50,000,000			
\$25,000,001 - \$100,000,000	=	- \$100,000,000			
Over \$100,000,000	Over \$100,00	00,000			
X Decline to Disclose	Decline to Disclose				
Not Applicable	Not Applicable				
6. Federal Exemption(s) and Exclusion(s)) Claimed (select all that app	oly)			
	·				
	Investme	nt Company Act Section 3(c)			
	Section 3	(c)(1) Section 3(c)(9)			
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3				
Rule 504 (b)(1)(i)		——————————————————————————————————————			
Rule 504 (b)(1)(ii)	Section 3	(c)(3) Section 3(c)(11)			
Rule 504 (b)(1)(iii)	Section 3	(c)(4) Section 3(c)(12)			
X Rule 506(b)	Section 3	(c)(5) Section 3(c)(13)			
Rule 506(c)	Section 3	_			
Securities Act Section 4(a)(5)					
	Section 3	(c)(7)			
	Ц				
7. Type of Filing					
X New Notice Date of First Sale 2024-08-3	First Sale Yet to Occur				
Amendment	<u> </u>				

8. Duration of Offering					
	s X No				
9. Type(s) of Securities Offered (select all that apply)					
Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Facquire Security	Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Qother (describe)				
10. Business Combination Transaction					
Is this offering being made in connection with a business combination to or exchange offer?	ransaction, such as a merger, acquisition XYes No				
Clarification of Response (if Necessary):					
11. Minimum Investment					
Minimum investment accepted from any outside investor \$0 USD					
12. Sales Compensation					
Recipient	Recipient CRD Number X None				
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None				
Street Address 1	Street Address 2				
City	State/Province/Country	ZIP/Postal Code			
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Foreign/non-US				
13. Offering and Sales Amounts					
Total Offering Amount \$50,000,000 USD or Indefinite Total Amount Sold \$50,000,000 USD Total Remaining to be Sold \$0 USD or Indefinite Clarification of Response (if Necessary):					
14. Investors					
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:					
15. Sales Commissions & Finder's Fees Expenses					
Provide separately the amounts of sales commissions and finders fees check the box next to the amount.	expenses, if any. If the amount of an expenditure is not known, pro-	vide an estimate and			
Sales Commissions \$0 USD Estimate					
Finders' Fees \$0 USD Estimate					
Clarification of Response (if Necessary):					
16. Use of Proceeds					
Provide the amount of the gross proceeds of the offering that has been executive officers, directors or promoters in response to Item 3 above.					
\$0 USD Estimate					
Clarification of Response (if Necessary):					
Signature and Submission					
Please verify the information you have entered and review the Terr	ns of Submission below before signing and clicking SUBMIT h	elow to file this			

Terms of Submission

notice.

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the
 accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
TXO Partners, L.P.	/s/ Bob R. Simpson	Bob R. Simpson	Chief Executive Officer	2024-09-05

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.