FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB	APP	RO\	/AI

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#### Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

affirmative defense of 10b5-1(c). See Instr								
Name and Address of Reporting Person*     ADAMS WILLIAM H III			2. Issuer Name and Ticker or Trading Symbol  TXO Partners, L.P. [ TXO ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) 400 W. 7TH STRI	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/30/2024	Officer (give title below)  See Remarks  Officer (specify below)				
(Street) FORT WORTH (City)	TX (State)	76102 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				

# Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Units	12/30/2024		P		14,000	A	\$16.9284(1)	92,784	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

-1	1. Title of	2.	3. Transaction	3A. Deemed	4. :				6. Date Exercisable and		7. Title and Amount of		8. Price of	9. Number of	10.	11. Nature	ı
-1	Derivative	Conversion	Date	Execution Date,	Transaction		Derivative		Expiration Date		Securities Underlying		Derivative	derivative	Ownership	of Indirect	L
-1	Security (Instr. 3)	or Exercise	(Month/Day/Year)	if any	Code (Instr.		Securities		(Month/Day/Year)		Derivative Security		Security	Securities	Form:	Beneficial	L
-1		Price of		(Month/Day/Year)	8) Acquired (A)		1		(Instr. 3 and 4)		(Instr. 5)	Beneficially	Direct (D)	Ownership	L		
-1		Derivative			or Disposed of		or Disposed of						Owned	or Indirect	(Instr. 4)	L	
-1		Security			(D) (Instr. 3, 4						Following	(I) (Instr. 4)		L			
-1					and 5)				l			Reported			L		
-1												1	Transaction(s)			L	
-1						l						Amount		(Instr. 4)			L
-1						l						or					1
-1						l			Date	Expiration		Number					1
1					Code	٧	(A)	(D)	Exercisable	Date	Title	of Shares					

### **Explanation of Responses:**

1. This transaction was executed in multiple trades at prices ranging from \$16.75 to \$17.00. The price reported above reflects the weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

#### Remarks

The Reporting Person is a Director of TXO GP, LLC, the general partner of the Issuer (the "General Partner"). The Issuer is managed by the directors and executive officers of the General Partner.

/s/ Brent W. Clum, Attorney-infact 01/02/2025

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.