FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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| Check this box if no longer subject | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|-------------------------------------|--|
| to Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |

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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* Grover Rosalind Redfern | | | | | 2. Issuer Name and Ticker or Trading Symbol Viper Energy Partners LP [VNOM] | | | | | | | | | (Che | eck all app | ationship of Reporti (all applicable) Director | | 10% Ow | |
|---|--|---------|---------|---------------------------------|---|---|-------------|---------------------------|-------------------------------------|--|---|----------|---|-------|---|--|---|---|--|
| (Last) 500 WES | (Fir | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/10/2020 | | | | | | | | | Office below | er (give title /) | | Other (specify below) | |
| SUITE 1200 (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| MIDLAI | ND TX | 7 | 9701 | | Form filed by More than One Reporting Person | | | | | | | | | | | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | | 2. Transad Date (Month/Da | Execution (ay/Year) if any | | | cution Date, | | 3. Transaction Code (Instr. 8) 4. Securitie Disposed (5) | | | | | Benefi | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A (D |) or | Price | Transa | Transaction(s) (Instr. 3 and 4) | | | (111501. 4) |
| Common Units representing limited partner interests | | | | 07/10/2020 | | | | | A ⁽¹⁾ | | 9,970(1) |) . | A | \$0 | 3. | 33,066 | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any | | | Date, | 4, Transaction Code (Instr. 8) | | of Deriv | r osed) r. 3, 4 | 6. Date E Expiration (Month/I | on Dat | e Amou sar) Secur Under Deriva | | erlying vative irity (In: d 4) | str. | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owi For Dire or li (I) (I | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ıble | Expiration Date | Title | or Numi of Share | | | | | | |

Explanation of Responses:

1. These securities are phantom units, each of which is the economic equivalent of one common unit representing a limited partner interest in the Issuer. These phantom units were granted under the Issuer's Long-Term Incentive Plan as an annual non-employee director award and will vest on July 10, 2021.

Remarks:

/s/ Teresa L. Dick, as attorneyin-fact for Rosalind Redfern 07/14/2020 Grover

** 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.