FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGE | S IN BENEFICIA | L OWNERSHIP |
|-----------|-----------|----------------|-------------|

| OMB APPROVAL | | | | | | | | | |
|--------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average | burden | | | | | | | | |
| 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

| 1. Name and Address of Reporting Person* <u>Lucent Technologies Inc. Master Pension</u> <u>Trust</u> | | | | 2. Issuer Name and Ticker or Trading Symbol DORCHESTER MINERALS LP [DMLP] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director | | | | | | | |
|--|-------------------|---------|---|--|---|------|--|----------|---|---------------------------|--------------------|---|---|---|---|--|--|-----------------|-----------|------------|
| (Last) | (Fii JNTAIN AV | , | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2005 | | | | | | | | | | Office | er (give title v) | | Other below) | (specify | |
| ROOM 7 (Street) | D-523 | | | | 4. If | Ameı | ndment | , Date (| of Origin | al File | d (Month/Da | ay/Ye | ear) | | . Indiv ine) X | | r Joint/Group | | | |
| . , | Y HILL NJ | (|)7974 | | | | | | | | | | | | | Form Pers | n filed by Mor on | re thai | n One Rep | orting |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Non | -Deriva | ative | Sec | curitie | s Ac | quire | l, Dis | posed o | f, o | r Ben | efici | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | Execution Date, | | Transaction Code (Instr. 5 | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Secu Bend Own | | rities I eficially (ed Following (| | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | | |
| | | | | | | | | | Cod | e V | Amount | | (A) or (D) | Price | : | | action(s) 3 and 4) | | | (Instr. 4) |
| Common | Units | | | 03/07/ | 2005 | | | | S | | 2,580 | | D | \$23 | 3.55 | 3,5 | 554,695 | | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| . Title of perivative ecurity enstr. 3) 2. Conversion or Exercise parts. 3) 3. Transaction Date (Month/Day/Year) Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) | | Date, T | 4. Transaction Code (Instr. 8) | | ı of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | derivative Securities | | O. 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 | Title | or Nu of | mber ares | | | | | | |

Explanation of Responses:

Eli Krupnik, Atty in Fact

03/09/2005

** 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.