FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person * SOUKI CHARIF				2. Issuer Name and Ticker or Trading Symbol Cheniere Energy Partners, L.P. [CQP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner					
700 MIL		(First) SUITE 800	(Middle)	3. Date of E 05/11/200		Trans	sactio	n (M	onth/Day	y/Year)		X_Offi	cer (give title bel	_{ow)} hairman & (Other (specify CEO	below)
попета	ON, TX 77	(Street)		4. If Amend	ment,	Date (Origin	nal Fi	iled(Montl	n/Day/Yea	ır)	_X_ Form f	dual or Joint/oiled by One Repo	orting Person		ible Line)
(City		(State)	(Zip)		Ta	ıble I -	- Non	-Der	rivative	Securiti	es Acqu	ıired, Disj	oosed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day	ate, if	Code		on	4. Secur (A) or I (Instr. 3	Dispose	d of (D)	Benefi Report	ount of Secur cially Owned ed Transaction 3 and 4)	Following	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
						Co	ode	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Units Representing Limited Partner Interests		05/11/2009			F	9		15,000		\$ 7.4309 (1) (3)	9 55,39	55,396		D		
Units Repartner In	presenting nterests	Limited	05/12/2009			F	9		14,200	A	\$ 7.4652 (2) (3)	2 69,59	6		D	
Units Representing Limited Partner interests											283,1	283,100		I	By wife.	
Reminder:	Report on a s	separate line fo	or each class of secur	ities benefici	ally ov	vned d					14-	4111-	-4:		QE(2.1474 (0.02)
								cont	tained i	n this t	orm ar	e not req	ection of inf uired to res d OMB con	spond unle	ess	C 1474 (9-02)
				Derivative See.g., puts, ca									1			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date Secution Date Execution Date any (Month/Day/Year) we	4. Transaction Code Year) (Instr. 8)		5. 6. Γ Number and		6. D and	Date Exercisable d Expiration Date conth/Day/Year)		7. T Am Und Sec	Fitle and acount of derlying curities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	Beneficial Ownershipy: (Instr. 4)	
				Code	V	(A)	(D)	Date Exer	e rcisable	Expirat Date	ion Titl	Amoun or Numbe of Shares				

Reporting Owners

D (1 0 N /		Re	lationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
SOUKI CHARIF 700 MILAM ST. SUITE 800 HOUSTON, TX 77002	X		Chairman & CEO	

Signatures

Anne V. Vaughan under POA by Charif Souki	05/13/2009
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) This price represents the weighted average purchase price. The purchase prices for these transactions ranged from \$7.30 to \$7.57.
- (2) This price represents the weighted averge purchase price. The purchase prices for these transactions ranged from \$7.40 to \$7.58.
- (3) The Reporting Person undertakes to provide upon request of the Securities and Exchange Commission, the issuer or a security holder of the issuer, full information regarding the number of units purchased at each separate price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.