FORM 4

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

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).

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)																	
Name and Address of Reporting Person* Cheniere Common Units Holding, LLC				2. Issuer Name and Ticker or Trading Symbol Cheniere Energy Partners, L.P. [CQP]									5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) (First) (Middle) 700 MILAM STREET SUITE 800				3. Date of Earliest Transaction (Month/Day/Year) 09/19/2011							-	Office	r (give title belo	ow)	Other (s	specify below	w)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
HOUST	ON, TX 77	002											_		d by More than	One Reporting	1 CISOII		
(City	·)	(State)	(Zip)			Tabl	le I -	Non	-Der	ivative	Secur	ities 2	Acquir	ed, Disp	osed of, or I	Beneficially	Owne	ed	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		, if T	Code		on	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)						Following In(s)	Form Direc	ership of Bot (D) Or	7. Nature of Indirect Beneficial Ownership
							Coe	de	V	Amou		A) or D)	Price				or Ind (I) (Instr		nstr. 4)
	u Units Rep Partner Int		09/19/2011				A			622,1	31 A		\$ 15.25	11,513	,488		D (1)	
			Table II - 1				,	ļuire	cont the f d, Di	ained i form di	n this splay of, or	s forr s a c	m are curren	not requ tly valid	ction of inf iired to res OMB cont	spond unle		SEC 14	74 (9-02)
	I.		,	~ ~	uts, calls,		rants	s, opt									2 4		
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Year) Execution Da			of De Se Ac (A Di of (Ir			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y O Fo D So O O O O O O O O O O O O O O O O O O	ownership orm of perivative ecurity: pirect (D) r Indirect	Beneficia Ownershi (Instr. 4)	
					Code V	V (A	A) ((D)	Date Exer	e rcisable	Expir Date	ation	Title	Amount or Number of Shares					

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Cheniere Common Units Holding, LLC 700 MILAM STREET SUITE 800 HOUSTON, TX 77002		X					

Signatures

/s/ Meg A. Gentle	09/21/2011
**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).
- This reflects the offer and sale to the Reporting Person of 622,131 common units representing limited partner interests in Cheniere Energy Partners, L.P. (the "Partnership"), pursuant to a Purchase Agreement, dated September 14, 2011, by and among the Reporting Person, the Partnership, Cheniere Energy Partners GP, LLC and Cheniere Energy Investments, LLC. The Reporting Person is a wholly owned subsidiary of Cheniere LNG Holdings, LLC, Cheniere LNG Terminals, Inc., Cheniere LNG, Inc. and Cheniere Energy, Inc., and as such, each of these entities is an indirect beneficial owner of the reported securities.

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.