CHENIERE ENERGY INC

Form 5

February 07, 2006

FORM 5

OMB APPROVAL OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per OWNERSHIP OF SECURITIES 5 obligations response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported

1. Name and Address of Reporting Person SOUKI CHARIF	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
	CHENIERE ENERGY INC [LNG]	(Check all applicable)			
(Last) (First) (Middle)	3. Statement for Issuer's Fiscal Year Ended	(Check an applicable)			
	(Month/Day/Year)	X Director 10% Owner			
^	12/31/2005	_X_ Officer (give title Other (specify			
717 TEXAS AVENUE, SUITE		below) Chairman & CEO			
3100					
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Reporting			
	Filed(Month/Day/Year)				
		(check applicable line)			

HOUSTON, TXÂ 77002

X Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State)	Zip) Tabl	e I - Non-Deri	ivative Sec	urities	Acqui	red, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit (A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/06/2005	Â	G	26,000	D	\$0	905,120	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	149,500	I	By Wife
Common Stock	Â	Â	Â	Â	Â	Â	1,600,000 (1)	I	By Trust
Common Stock	Â	Â	Â	Â	Â	Â	120,000 (2)	I	By Children

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

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 control number.

SEC 2270 (9-02)

D

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	
				4, and 5) (A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
SOUKI CHARIF 717 TEXAS AVENUE SUITE 3100 HOUSTON, TX 77002	ÂX	Â	Chairman & CEO	Â			

Signatures

Don A. Turkleson under POA by Charif Souki 02/07/2006

**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) These shares are owned of record by a trust of which the Reporting Person is the sole beneficiary and over which the Reporting Person has investment control.
- (2) These shares are held by the Reporting Person's three children who share the same household or are economically dependent on the Reporting Person.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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