## 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

1 37 1 4 11 CT													
KILPATRICK DAV	Reporting Person * TID B		2. Issuer Name an CHENIERE EN						_X_ Direct	(Che		able) 10% Owner	
35 HARBOR RIDGI	(First) E DR.	(Middle)	3. Date of Earliest 12/22/2008	Transactio	n (Mon	nth/Day	/Year)		Office	r (give title belo	ow)	Other (specify b	elow)
	(Street)		4. If Amendment,	Date Origi	nal File	ed(Month	/Day/Year)		_X_ Form file	ed by One Repo	Group Filing orting Person One Reporting		ole Line)
NEWPORT BEACH (City)	(State)	(Zip)											
	· · ·										Beneficially		
1.Title of Security (Instr. 3)	Date	nth/Day/Year)	•	3. Transa Code (Instr. 8)	(	(A) or I	rities Acq Disposed ( , 4 and 5)	of (D)	Beneficial Reported	t of Securiti lly Owned F Transaction	ollowing	6. Ownership Form:	7. Nature of Indirect Beneficial
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)			Ownership (Instr. 4)
Common Stock	12/2	22/2008		S	8	800		\$ 2.92	177,782			D	
Common Stock	12/2	22/2008		S	4	504		\$ 2.95	177,278			D	
Common Stock	12/2	22/2008		S	3	500		\$ 2.98	176,778			D	
Common Stock	12/2	22/2008		S	2	200		\$ 2.99	176,578			D	
								2.99					
Reminder: Report on a se	parate line for eacl	h class of securi	ties beneficially ow		Perso contai	ns wh	o respon	nd to t	not requ		ormation spond unle	ss	1474 (9-02)
Reminder: Report on a se	parate line for eacl	Table II - I	ties beneficially ow Derivative Securities, puts, calls, wa	es Acquire	Perso contai the fo	ons who	o responding this for plays a	nd to to to mare curren	not requ ntly valid	ired to res	spond unle	ss	1474 (9-02)
1. Title of 2. 3 Derivative Conversion I	parate line for each	Table II - I (a 3A. Deemed Execution Dat any	Derivative Securities, puts, calls, wa 4. e, if Transaction Code (ear) (Instr. 8)	es Acquire rrants, op	Perso contai the for ed, Disp tions, c	ons who	o responding this for plays a of, or Bendible secutions between Date	nd to to the current deficial rities)  7. Ti Amound Second	not requ ntly valid	OMB cont	spond unle trol numbe	of 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natu of Indire Benefici Ownersl (Instr. 4

Relationships

Officer

Other

10%

Owner

Director

X

### **Signatures**

Reporting Owner Name / Address

KILPATRICK DAVID B

35 HARBOR RIDGE DR. NEWPORT BEACH, CA 92660

/s/ Anne V. Vaughan under POA by David B. Kilpatrick	12/23/2008	8	3																						3		3	3	3	;						Ì	;			,		3						3					08	8	8	3																			,									3
**Signature of Reporting Person	Date			Ī	Ī											l	Ì										_								Ī	Ī		Ī	Ì	Ī	Ī		Ī	Ī		 ı	ı	_									_						 	 		Ī			Ì	Ī	Ī		ı	İ,	Ī	 ="		 	 	 Ì	-	 Ī	Ī	 

## **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).

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.