FORM 5

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

OMB APPROVAL						
OMB Number:	3235-0362					
Estimated averag	e burden					
hours per respons	se 10					

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

ANNUAL 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. Name and Address of Reporting Person * SOUKI CHARIF			2. Issuer Name and Ticker or Trading Symbol TELLURIAN INC. /DE/ [TELL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner			
(Last) 1201 LOUISIANA	(First) A STREET, S	(Middle) SUITE 3100	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019					Officer (give title below) Other (specify below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
HOUSTON, TX 77002								_X_Form Filed by One Reporting Person Form Filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)				Issuer's Fiscal Year Form:		7. Nature of Indirect Beneficial	
			(Month/Day/Year)		Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		07/16/2019		G	50,000 (1)	D	\$ 0	28,603,853	D		
Common Stock		11/20/2019		G	20,000	D	\$ 0	28,553,853	D		
Common Stock		12/04/2019		G	20,000 (<u>3</u>)	D	\$ 0	28,533,853	D		
Common Stock								26,000,000 (4)	I	By Souki Family 2016 Trust	

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)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(cig.) patts, taile, warrants, options, ton vertiles,														
1. Title o	f 2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature
Derivativ	e Conversion	Date	Execution Date, if	Transaction	Numl	oer	and Expiration	on Date	Amou	ınt of	Derivative	of	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	Year)	Unde	rlying	Security	Derivative	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqu	ired			4)			Owned at	Direct (D)	
					(A) o	r						End of	or Indirect	
					Dispo	sed						Issuer's	(I)	
					of (D)						Fiscal Year	(Instr. 4)	
					(Instr	. 3,						(Instr. 4)		
					4, and	15)								
										Amount				
										or				
								Expiration		Number				
							Exercisable	Date		of				
					(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
SOUKI CHARIF 1201 LOUISIANA STREET, SUITE 3100 HOUSTON, TX 77002	X	X					

Signatures

/s/ Charif Souki	02/10/2020
***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) Represents a charitable gift by the reporting person.
- (2) Represents a charitable gift by the reporting person.
- (3) Represents a charitable gift by the reporting person.
- (4) 26,000,000 shares of Common Stock are held by the Souki Family 2016 Trust (the "Trust"). The Reporting Person is the trustee of the Trust, and the beneficiaries of the Trust are immediate family members of 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.