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 TELLURIAN INC. /DE/ [TELL]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner				
(Last) (First) (Middle) 1201 LOUISIANA STREET, SUITE 3100					3. Date of Earliest Transaction (Month/Day/Year) 02/26/2020						-		r (give title belo		Other (specify	below)
(Street) HOUSTON, TX 77002				4. If	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				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						Acquir	ed. Dispo	osed of, or I	Beneficially	Owned		
(Instr. 3)		2. Transaction Date (Month/Day/Year)	any	eemed ion Date, if	3. Transac Code (Instr. 8)					red (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form:	Beneficial		
			(Monti	(Month/Day/Year)		e	V	Amount	(A) or (D)	Price	(Instr. 3	(Instr. 3 and 4)		` /	Ownership (Instr. 4)	
Common	Stock		02/26/2020			S ⁽¹⁾	1		2,000,000	D	\$ 4.73 (2)	24,000	,000		I	By Souki Family 2016 Trust (3)
Common Stock		02/28/2020	020		S <u>(1</u>	1		2,001,139	D	\$ 1.82 (2)	21,998,861		I	By Souki Family 2016 Trust (3)		
Common	Stock											28,533	,853		D	
Reminder:	Report on a s	separate line	for each class of sec	urities b	eneficially o	wned d		-	r indirectly.	espo	nd to t	he collec	ction of inf	ormation	SEC	C 1474 (9-02)
								cor	ntained in the form displa	nis fo	rm are	not requ	ired to res	spond unle	ss	1171 (5 02)
			Table II						Disposed of,			y Owned				
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transacti Date (Month/Day	Execution I	d Date, if	4. Transaction Code	5.	er ative ties red sed 3,	and Expiration Date (Month/Day/Year)		7. Tit Amor Unde Secur	ount of Derivative Security		9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form o Derivat Securit Direct (or India	tive Ownershi (Instr. 4) (D) rect	
					Code V	(A)		Da Ex	te Expercisable Da	piration te	Title	Amount or Number of Shares				

Reporting Owners

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

Signatures

/s/ Daniel Belhumeur under Power of Attorney by Charif Souki	02/28/2020	
**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) The reported transaction was an involuntary sale effected by a lender to satisfy certain loan requirements.
- (2) The price reported in Column 4 is an estimated average price and if necessary will be amended when a final determination is made. These shares were sold in multiple transactions within a range of prices to be provided in an amendment to this Form 4.
- (3) The shares of Common Stock that are indirectly beneficially owned 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 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.