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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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						2. Issuer Name <b>and</b> Ticker or Trading Symbol Enstar Group LTD [ ESGR ]									tionship of all applical Director	Reporting Person(s) to Issue ble)			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 01/03/2017									Officer (give title below)			Other (specify below)	
C/O STONE POINT CAPITAL LLC 20 HORSENECK LANE					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person				
(Street) GREENWICH CT 06830-6327												X	Form filed by More than One Paparting						
(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)						Execution Date, ear) if any			Transaction [		Dispo	4. Securities Acquired Disposed Of (D) (Instr. and 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amou	unt (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				
			Table				ecurities <i>i</i> alls, warra								ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	Execution any	3A. Deemed Execution Date, if any (Month/Day/Year)		action nstr. 8)			6. Date Exercisab Expiration Date (Month/Day/Year		Securities Underly		ying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned	e es ally	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security				Code	v	(A)	(D)	Date Exercisab	Date Ex Exercisable Da		1 1		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)		(1) (111511.4)	
Share Unit	(1)	01/03/2017			A <sup>(2)</sup>		118.747 <sup>(3)</sup>		(1)		(1)		linary nares	118.747	\$197.9	2,504.	.794	D <sup>(2)</sup>	
Name and Address of Reporting Person*     Carey James D																			
(Last) (First) (Middle) C/O STONE POINT CAPITAL LLC 20 HORSENECK LANE																			
(Street) GREENWICH CT 06830-6327			327																
(City)	City) (State) (Zip)																		
1. Name and Ad STONE P		eporting Person																	
(Last) (First) (Middle) 20 HORSENECK LANE																			
(Street) GREENWIC	H C	Γ	06	830-63	327														
(City) (State) (Zip)																			

Explanation of Responses:

- 1. Each Share Unit is granted pursuant to the Enstar Group Limited Deferred Compensation and Ordinary Share Plan for Non-Employee Directors (the "Plan"). Pursuant to the Plan, each Share Unit is the economic equivalent of one ordinary share. The Share Units become payable in ordinary shares (with any fractional shares paid in eash) upon Mr. Carey's termination of service as a member of the Board of Directors of Enstar Group Limited.
- 2. These Share Units granted to Mr. Carey are held by him solely for the benefit of Stone Point Capital LLC ("Stone Point"), of which Mr. Carey is a senior principal. Mr. Carey disclaims beneficial ownership of these Share Units, except to the extent of his pecuniary interest therein, if any. Stone Point may be deemed an indirect beneficial owner of these Share Units.
- 3. Share Units granted as a result of Mr. Carey's election, pursuant to the Plan, to defer quarterly cash director fees.

## Remarks:

/s/ Audrey B. Taranto by power of attorney 01/05/2017

\*\* Signature of Reporting Person Date

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

- \* 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.

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 Number.