

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL	
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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* <u>Enstar Group LTD</u> (Last) (First) (Middle) PO BOX 2267, WINDSOR PLACE THIRD FLOOR, 22 QUEEN STREET (Street) HAMILTON D0 HM JX (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 07/23/2019	3. Issuer Name and Ticker or Trading Symbol <u>Eagle Point Income Co Inc. [EIC]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,764,580	I	See footnote ⁽¹⁾

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				

1. Name and Address of Reporting Person*
Enstar Group LTD
 (Last) (First) (Middle)
 PO BOX 2267, WINDSOR PLACE
 THIRD FLOOR, 22 QUEEN STREET
 (Street)
 HAMILTON D0 HM JX
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Kenmare Holdings Ltd.
 (Last) (First) (Middle)
 PO BOX 2267, WINDSOR PLACE
 THIRD FLOOR, 22 QUEEN STREET
 (Street)
 HAMILTON D0 HM JX
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Cavello Bay Reinsurance Ltd
 (Last) (First) (Middle)
 PO BOX 2267, WINDSOR PLACE
 THIRD FLOOR, 22 QUEEN STREET
 (Street)
 HAMILTON D0 HM JX
 (City) (State) (Zip)

(City)

(State)

(Zip)

Explanation of Responses:

1. These shares are owned directly by Cavello Bay Reinsurance Limited, a Bermuda company, which is a wholly-owned subsidiary of Kenmare Holdings Ltd., a Bermuda company ("Kenmare"), which is a wholly-owned subsidiary of Enstar Group Limited, a Bermuda company ("Enstar"). Kenmare and Enstar are indirect beneficial owners of the reported securities.

Remarks:

Enstar Group Limited, By: /s/
Guy Bowker, Name: Guy 07/23/2019
Bowker, Title: CFO

Kenmare Holdings Ltd., By: /s/
Guy Bowker, Name: Guy 07/23/2019
Bowker, Title: Director

Cavello Bay Reinsurance
Limited, By: /s/ Guy Bowker, 07/23/2019
Name: Guy Bowker, Title:
Director

** 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 5 (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.