FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

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>Carey James D</u>					2. Issuer Name and Ticker or Trading Symbol Enstar Group LTD [ESGR]						5. Relationship of Reporting (Check all applicable) X Director			ng Person(s) to Issuer 10% Owner			
	,	First) Γ CAPITAL LLC .ANE	(Middle)	1	3. Date of Earliest Transaction (Month/Day/Year) 10/01/2020					Officer (give title Other (spec below) below)							
(Street) GREENWICH CT 06830-6327			'	4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)																	
		Ta	able I - Non-D	erivat	ive S			_	sposed o	of, or Be	neficia	ally C	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			te	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 and 1)					Fori		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code V	Amount	(A) o (D)	r Price	e	Transaction(s)				(msu. 4)
			Table II - De (e.g	rivativ g., put	/e Sed	curities <i>A</i> Ils, warra	cqu ints.	uired, Disp options,	osed of converti	or Bendele	eficiall ırities)	ly Ov)	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	action (Instr.	5. Number of Derivative Securities Acquired (ADisposed of (D) (Instr. 3 and 5)	A) or	6. Date Exer Expiration D (Month/Day/	ate	of Securi Underlyi Derivativ	Fitle and Amount Securities		8. Price of Derivative Security		s For ally Dire or I g (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiratior Date	Title	Amour or Number of Sha	er	Transaction(s (Instr. 4)			(5)	
Share Unit	(1)	10/01/2020		A ⁽²⁾		134.936 ⁽³⁾		(1)	(1)	Ordinary Shares	134.9	936	\$163.04	6,017	.92	D ⁽²⁾	
	nd Address o	f Reporting Person [*]															
	ONE POINT	(First) Γ CAPITAL LLC .ANE	(Middle)														
(Street) GREENWICH CT 06830-6327																	
(City)		(State)	(Zip)														
		f Reporting Person*	L <u>C</u>														
(Last) 20 HOR	SENECK I	(First) .ANE	(Middle)														
(Street)	WICH	СТ	06830-63	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 cash) upon Mr. Carey's termination of service as a member of the Board of Directors of Enstar Group Limited.
- 2. These Share Units and Restricted 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 the Reporting Person's election, pursuant to the Plan, to defer quarterly cash director fees.

Remarks:

/s/ Audrey B. Taranto by power of attorney

10/05/2020

** 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.