FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					C	or Sec	:uon 30(n) oi	i the i	nvesimei	IL COI	mpany Act o	1940							
					2. Issuer Name and Ticker or Trading Symbol Enstar Group LTD [ESGR]									ationship of Reporting Pers k all applicable) Director			on(s) to Iss		
(Last) (First) (Middle)				- <u> </u>	Date of Earliest Transaction (Month/Day/Year)							\dashv	X		give title			specify	
	•	ΓCAPITAL LLO	` '				2022				.,				,			,	
20 HORSENECK LANE 4. If J				I. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street) GREENWICH CT 06830-63		27										_ine) X	Form filed by One Reporting P			-			
(City) (State) (Zip)																			
		Та	ble I - No	n-Deri	ivativ	ve S	ecurities	Acc	uired,	Dis	posed of	f, or Ber	efici	ally	Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year				Execution Date,		Transaction Dispose Code (Instr. 5)		Disposed	ties Acquired (A) d Of (D) (Instr. 3,			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Pric	:e	Transacti	nsaction(s) etr. 3 and 4)			(msu. 4)	
			Table II -				curities A								Owned				
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)		4. Transaction Code (Instr.		5. Number of Derivative		6. Date Exercis Expiration Date (Month/Day/Yes		isable and	7. Title an Amount of Securities Underlyin Derivative (Instr. 3 a	d of s g e Secur		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A) (D)		Date Exercisable		Expiration Date	Title	Amou or Numb of Share	ber		(Instr. 4)	ion(s)		
Share Unit	(1)	01/03/2022			A ⁽²⁾		127.77 ⁽³⁾		(1)		(1)	Ordinary Shares	127.	.77	\$250.45	7,195.6	656	D ⁽²⁾	
	nd Address o	f Reporting Person																	'
	ONE POINT SENECK I	(First) Γ CAPITAL LLO ANE	(Midd	le)															
(Street) GREENWICH CT 06830-6327																			
(City)		(State)	(Zip)																
		f Reporting Person [*] CAPITAL L																	
(Last)	SENECK I	(First) .ANE	(Midd	le)															
(Street)																			

Explanation of Responses:

CT

(State)

GREENWICH

- 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 managing director. 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.

06830-6327

(Zip)

Remarks:

(City)

/s/ Audrey B. Taranto by power of attorney

** Signature of Reporting Person

Date

01/05/2022

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.