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Bowker Guy Thomas Anthony Form 4 March 08, 2019

March 08, 20	19											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
Washington, D.C. 20549									OMB Number:	3235-0287		
Check this if no long	er								January 31,			
subject to Section 10 Form 4 or	5. 5.		GES IN BENEFICIAL OWNERSHI SECURITIES					Estimated a burden hou response	rs per			
Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).												
(Print or Type R	esponses)											
Bowker Guy Thomas Anthony Symbol				Name and			g	5. Relationship of Reporting Person(s) to Issuer				
	roup LTI) [ESGF	{]		(Check all applicable)							
(Month/D				•				Director 10% Owner X_ Officer (give title Other (specify				
C/O 22 QUEEN 03/06/20 STREET, WINDSOR PLACE, 3RD FLOOR)19				below) below) Chief Financial Officer				
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
HAMILTON	I, D0 HM 11							Form filed by I Person	More than One Re	porting		
(City)	(State)	(Zip)	Table	I - Non-Do	erivative	Securi	ties Ac	quired, Disposed o	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securi onAcquirec Disposec (Instr. 3,	l (A) o l of (D 4 and (A))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Ordinary Shares	03/06/2019			Code V $A^{(1)}$	Amount 1,531	or (D) A (1)	Price \$ 0	(Instr. 3 and 4) 3,021 (2)	D			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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)	4. Transact Code (Instr. 8)	5. iorNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
Bowker Guy Thomas Ant C/O 22 QUEEN STREET WINDSOR PLACE, 3RD HAMILTON, D0 HM 11			Chief Financial Officer						
Signatures									
Audrey B. Taranto	03/08/20)19							
**Signature of	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).
- Represents a grant pursuant to the Enstar Group Limited 2016 Equity Incentive Plan of Restricted Share Units ("RSUs") that vest in three (1) equal annual installments beginning on the first anniversary of the grant date. The RSUs are payable in ordinary shares upon vesting and each RSU is the economic equivalent of one ordinary share.
- Includes 183 RSUs that vest on November 17, 2019; 593 RSUs that vest in two approximately equal annual installments beginning on (2) November 17, 2019; and 1,531 RSUs that vest in three approximately equal annual installments beginning on November 17, 2019.

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.

Reporting Person