**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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1. **Name and Address of Reporting Person**
   - **OAKES TIMOTHY**
     - (Last) OAKES
     - (First) TIMOTHY
     - (Middle)
     - **C/O ENDURANCE INT'L GROUP HOLDINGS, INC.**
     - **10 CORPORATE DRIVE**
     - **BURLINGTON MA 01803**

2. **Issuer Name and Ticker or Trading Symbol**
   - **Endurance International Group Holdings, Inc. [EIGI]**

3. **Date of Earliest Transaction**
   - **02/05/2020**

4. **Relationship of Reporting Person(s) to Issuer**
   - **Chief Accounting Officer**

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**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Transaction Date</th>
<th>Deemed Execution Date</th>
<th>Transaction Code</th>
<th>Securities Acquired (A) or Disposed Of (D)</th>
<th>Amount</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>02/05/2020</td>
<td></td>
<td>A</td>
<td>52,521 A</td>
<td>$0.00</td>
<td>95,021(1)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Title of Derivative Security</th>
<th>Conversion or Exercise Price</th>
<th>Transaction Date</th>
<th>Deemed Execution Date</th>
<th>Transaction Code</th>
<th>Number of Derivative Securities Acquired (A) or Disposed of (D)</th>
<th>Date Exercisable and Expiration Date</th>
<th>Title and Amount of Securities Underlying Derivative Security</th>
<th>Price of Derivative Security</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

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**Explanation of Responses:**
1. Includes 95,021 shares of common stock underlying restricted stock units, all of which are subject to time-based vesting.

**Remarks:**

/s/ Anna B. Jarosinski,atty-in-fact 02/07/2020

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).


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.