Stancic Ana Form 3 June 09, 2011			
FORM 3	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Weshington D.C. 20540	OMB AI	PPRO
	Washington, D.C. 20549	OMB Number:	32
	INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF	F	Jar

SECURITIES

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 1940

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35-0104 nuary 31, Expires: 2005 Estimated average burden hours per response... 0.5

6. Individual or Joint/Group

Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Stancic Ana		2. Date of Event RequiringStatement(Month/Day/Year)	^g 3. Issuer Name and Ticker or Trading Symbol ENZON PHARMACEUTICALS INC [ENZN]		
(Last)	(First)	(Middle)	06/08/2011	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
C/O ENZO PHARMAC		LS,		(Check all applicable)	

Director

(give title below) (specify below)

Senior VP, Finance and CFO

_X__Officer

10% Owner

Other

(Street)

INC., 20 KINGSBRIDGE

ROAD

PISCATAWAY, NJÂ 08854

PISCATAV	VAY, NJ	08854			Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)	Table I - Non-Deriva	ative Securit	ies Beneficially Owned
1.Title of Secu (Instr. 4)	ırity		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)
Reminder: Rep owned directly	· •		lass of securities beneficially	SEC 1473 (7-02	2)
			d 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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

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Date Exercisable	Expiration 7 Date	Title	Amount or Number of	Security	Direct (D) or Indirect
			Shares		(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships				
		Director	10% Owner	Officer	Other	
Stancic Ana C/O ENZON PHARMACEUTICALS, INC. 20 KINGSBRIDGE ROAD PISCATAWAY, NJ 08854		Â	Â	Senior VP, Finance and CFO	Â	
Signatures						
/s/ Ana Stancic	06/09/2011					
** Signature of	Date					

Explanation of Responses:

No securities are beneficially owned

- * 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).

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Remarks:

Reporting Person

Exhibit List Exhibit 24.1 - Power of Attorney

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.