#### Edgar Filing: ENZON PHARMACEUTICALS INC - Form 4

#### **ENZON PHARMACEUTICALS INC**

Form 4

December 13, 2006

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287 January 31,

2005

0.5

Check this box if no longer subject to

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Expires: Estimated average

**OMB APPROVAL** 

response...

burden hours per

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* **CLASSON ROLF A** 

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

below)

Symbol

ENZON PHARMACEUTICALS INC [ENZN]

(Check all applicable)

(Last) (First)

3. Date of Earliest Transaction

(Month/Day/Year)

12/11/2006

X\_ Director Officer (give title

10% Owner Other (specify

C/O ENZON

PHARMACEUTICALS, 685 RTE

(Street)

(State)

202/206

(City)

1.Title of

Security

(Instr. 3)

Common

Stock

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

BRIDGEWATER, NJ 08807

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Zip)

(Middle)

3. 4. Securities Acquired (A) 5. Amount of Transactionr Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

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

Following

Reported

Ownership Form: Direct (D) or Indirect

(Instr. 4)

D

Indirect Beneficial Ownership (Instr. 4)

7. Nature of

(A) or (D) Price Amount

Transaction(s) (Instr. 3 and 4)

Code V 42,516 D M 30,000 2.9375

Common Stock

12/11/2006

12/11/2006

S \$ 8.227 12.516 30,000 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.

**SEC 1474** (9-02)

1

### Edgar Filing: ENZON PHARMACEUTICALS INC - Form 4

# 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. Transactic Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy) (1)	\$ 2.9375	12/11/2006		M		30,000	(2)	01/02/2007	Common Stock	30,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
CLASSON ROLF A C/O ENZON PHARMACEUTICALS 585 RTE 202/206 BRIDGEWATER, NJ 08807	X					

## **Signatures**

Craig A. Tooman, attorney in fact 12/13/2006

\*\*Signature of Reporting Person 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).
- (1) Employee stock option granted by Issuer pursuant to its Non-Qualified Stock Option Plan, as amended, and qualified under Rule 16b-3(d).
- (2) The shares underlying the options exercised became exercisable on or before January 2, 2000.

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 Owners 2