

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>COUCHMAN JONATHAN</u> <hr/> (Last) (First) (Middle) 630 FIFTH AVENUE SUITE 2260 <hr/> (Street) NEW YORK NY 10020 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 04/04/2018	3. Issuer Name and Ticker or Trading Symbol <u>ENZON PHARMACEUTICALS, INC. [ENZN]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) See Footnote 1	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	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)
Common Stock, \$0.01 par value ⁽¹⁾	3,577,664	D	
Common Stock, \$0.01 par value ⁽¹⁾	400,000	I	By Couchman Family Fund ⁽²⁾
Common Stock, \$0.01 par value ⁽¹⁾	714,500	I	By Xstelos Corp. ⁽³⁾

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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

1. Name and Address of Reporting Person* <u>COUCHMAN JONATHAN</u> <hr/> (Last) (First) (Middle) 630 FIFTH AVENUE SUITE 2260 <hr/> (Street) NEW YORK NY 10020 <hr/> (City) (State) (Zip)
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1. Name and Address of Reporting Person*		
Couchman Family Fund		
(Last)	(First)	(Middle)
630 FIFTH AVENUE SUITE 2260		
(Street)		
NEW YORK	NY	10020
(City) (State) (Zip)		

1. Name and Address of Reporting Person*		
Xstelos Corp.		
(Last)	(First)	(Middle)
1105 NORTH MARKET STREET SUITE 1300		
(Street)		
WILMINGTON	DE	19801
(City) (State) (Zip)		

Explanation of Responses:

1. This Form 3 is filed jointly by Jonathan Couchman ("Mr. Couchman"), Couchman Family Fund (the "Foundation") and Xstelos Corp. ("Xstelos" and, together with Mr. Couchman and the Foundation, the "Reporting Persons"). Each of the Reporting Persons may be deemed to be a member of a Section 13(d) group that collectively owns more than 10% of the Issuer's outstanding shares of Common Stock (the "Shares"). Each of the Reporting Persons expressly disclaims beneficial ownership of the Shares reported herein except to the extent of his or its pecuniary interest therein, and this report shall not be deemed to be an admission that any Reporting Person is the beneficial owner of such Shares for purposes of Section 16 or for any other purpose.

2. Represents Shares owned directly by the Foundation. Mr. Couchman is the sole trustee of the Foundation. By virtue of this relationship, Mr. Couchman may be deemed to beneficially own the Shares owned directly by the Foundation, however he has no pecuniary interest in such Shares.

3. Represents Shares owned directly by Xstelos. Mr. Couchman is the controlling shareholder and Chief Executive Officer of Xstelos. By virtue of these relationships, Mr. Couchman may be deemed to beneficially own the Shares owned directly by Xstelos. Mr. Couchman expressly disclaims beneficial ownership of such Shares except to the extent of his pecuniary interest therein.

/s/ Jonathan Couchman 04/13/2018
Couchman Family Fund; By:
/s/ Jonathan Couchman, 04/13/2018
Trustee
Xstelos Corp.; By: /s/
Jonathan Couchman, Chief 04/13/2018
Executive Officer

** Signature of Reporting Person Date

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 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).

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.