

<b>OMB APPROVAL</b>	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**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

1. Name and Address of Reporting Person* <u>Stancic Ana</u> <hr/> (Last) (First) (Middle) <u>C/O ENZON PHARMACEUTICALS, INC.</u> <u>20 KINGSBRIDGE ROAD</u> <hr/> (Street) <u>PISCATAWAY NJ 08854</u> <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>ENZON PHARMACEUTICALS INC [ ENZN ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) <u>Executive VP, COO, PEO CFO</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>11/17/2011</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year) <u>11/21/2011</u>		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price					

**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. Transaction Code (Instr. 8)		5. Number of 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 Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					
Employee Stock Option (Right to Buy) <sup>(1)</sup>	\$6.37	11/17/2011		A		125,000		(2)	11/17/2021 <sup>(3)</sup>	Common Stock	\$0	125,000 <sup>(4)</sup>	D	

**Explanation of Responses:**

- Options granted by the Issuer pursuant to its 2011 Stock Option and Incentive Plan and qualified under Rule 16b-3(d).
- The options will vest in four (4) tranches. Of the 125,000 options granted, 31,250 options will vest on November 17, 2012, 31,250 options will vest on November 17, 2013, 31,250 options will vest on November 17, 2014, and the remaining 31,250 options will vest on November 17, 2015, in each case if the Reporting Person remains employed by the Issuer on such date.
- The Reporting Person's Form 4 filed on November 21, 2011 incorrectly reported that the expiration date of the stock options was November 17, 2011.
- The Reporting Person's Form 4 filed on November 21, 2011 incorrectly reported that the Reporting Person beneficially owned 155,000 of the subject stock options.

/s/ Andrew Rackear, Attorney-in-Fact 01/19/2012

\*\* 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 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).

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.**