FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

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* BUCHALTER JEFFREY H (Last) (First) (Middle) 685 ROUTE 202/206 (Street) BRIDGEWATER NJ 08807					2. Issuer Name and Ticker or Trading Symbol ENZON PHARMACEUTICALS INC [ENZN] 3. Date of Earliest Transaction (Month/Day/Year) 06/10/2005 4. If Amendment, Date of Original Filed (Month/Day/Year)										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) Chief Executive Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Sta	ate) (Z	Zip)												Pe	rson				
		Tabl	e I - N	lon-Deriv	ative S	Secu	ıritie	s Acq	uired,	Disp	osed of	f, or I	3ene	eficia	lly Ow	ned				
Date					h/Day/Year) if an			. Deemed ecution Date, any onth/Day/Year)		3. 4. Securi Transaction Disposed Code (Instr. 8)					Sec Ben Owr				7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	() or	Price	Rep Trai	Following Reported Transaction(s) (Instr. 3 and 4)		4)	(Instr. 4)	
Common	06/10/2	2005				P		10,000	0 A		\$5.7	.75 88,234		D						
		Та	ble II	- Derivat											Owne	d				
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.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			8. Price of Derivativ Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ow For Dir or (I) (Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership			
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or	ount mber ares						

Explanation of Responses:

/s/ Jeffrey H. Buchalter

06/10/2005

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).