FORM 4

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

1. Name and Address of Reporting Person\*

<u>Couchman Family Fund</u>

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

9	STAT	EME	NT O	F CH	<b>ANG</b>

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden

hours per response:

0.5

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*  COUCHMAN JONATHAN				EI	2. Issuer Name and Ticker or Trading Symbol ENZON PHARMACEUTICALS, INC. [ ENZN ]							S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director X 10% Owner     Officer (give title Other (specify)									
(Last) (First) (Middle) 600 FIFTH AVENUE 2ND FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 08/05/2020										below	"		b€	elow)			
(Street) NEW YORK NY 10020			4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  X  Person  A  Person									
(City)	(S	tate) (	Zip)													Perso	)rı				
			I - Non-Deriva	_				_		ed, C	_				_		_				
,, ,,			2. Transaction Date (Month/Day/Ye		2A. Deemed Execution Date, if any (Month/Day/Year)		C	3. Transaction Code (Instr. 8)						Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								C	ode	v	Am	ount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock, \$0.	01 par value <sup>(1)</sup>														4,717,6	66	I		_	onathan chman <sup>(2)</sup>
Common	Stock, \$0.	01 par value <sup>(1)</sup>														400,000		I		By Couchman Family Fund <sup>(3)</sup>	
Common Stock, \$0.01 par value <sup>(1)</sup>		08/05/202	20				P		50	06,292	A	\$0.2	2,100,52		24	I		By Xstelos Corp. <sup>(4)</sup>			
Common	mmon Stock, \$0.01 par value <sup>(1)</sup>															633,264		I	By M Inc. <sup>(5)</sup>		Myrexis,
Common Stock, \$0.01 par value <sup>(1)</sup>															1,667,294		I		By Harper Asset Management LLC <sup>(6)</sup>		
Common Stock, \$0.01 par value <sup>(1)</sup>							T								0		I		By N Pear	Michael ce <sup>(7)</sup>	
		Ta	ble II - Derivati (e.g., pu													/ Owned	t				
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. Tran	nsactio	5. on of tr. De Se Ad (A Di of (Ir	Num	hber 6. Date Expirat (Month		ate Ex	e Exercisable and ation Date h/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8	B. Price of Derivative Security Instr. 5)	deriva Securi Benefi Owned Follow Report	ities Form. icially Direct or Ind ving (I) (Instance) action(s)			
				Cod	le V	(A	.)	(D)	Date Exe	e rcisab		Expiration Date	Title	Amoun or Numbe of Shares	er						
		f Reporting Person <sup>*</sup>	•			·									·						
(Last) 600 FIF 2ND FL	ГН AVENU OOR	(First) JE	(Middle)																		
(Street) NEW Y	ORK	NY	10020																		
(City)		(State)	(Zip)		_																

(Last) 600 FIFTH AVEN 2ND FLOOR	(First) UE	(Middle)						
,								
(Street) NEW YORK	NY	10020						
(City)	(State)	(Zip)						
Name and Address     Xstelos Corp.	of Reporting Person*							
(Last) 1105 NORTH MA SUITE 1300	(First) RKET STREET	(Middle)						
(Street) WILMINGTON	DE	19801						
(City)	(State)	(Zip)						
1. Name and Address  Myrexis, Inc.	of Reporting Person*							
(Last) 600 FIFTH AVEN 2ND FLOOR	(First) UE	(Middle)						
(Street) NEW YORK	NY	10020						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* <u>Harper Brian James</u>								
(Last) 2248 MARINER I	(First) OR.	(Middle)						
(Street) LONGMONT	СО	80503						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* HARPER ASSET MANAGEMENT LLC								
(Last) 2248 MARINER I	(First)	(Middle)						
(Street) LONGMONT	СО	80503						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*  Pearce Michael Cooper								
(Last) 193 AUDUBON T	(First)	(Middle)						
(Street) CASHIERS	NC	28717						
(City)	(State)	(Zip)						

## **Explanation of Responses:**

<sup>1.</sup> This Form 4 is filed jointly by Jonathan Couchman ("Mr. Couchman"), Couchman Family Fund (the "Foundation"), Xstelos Corp. ("Xstelos") and Myrexis, Inc. ("Myrexis"), Brian Harper, Harper Asset Management, LLC ("HAM"), and Michael Pearce, (collectively, 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 Mr. Couchman. As the sole trustee of the Foundation, Mr. Couchman may be deemed to beneficially own the Shares owned by the Foundation. As the Chief Executive Officer of Xstelos, Mr. Couchman may be deemed to beneficially own the shares of Common Stock owned by Xstelos. As the Chief Executive Officer of Myrexis, Mr. Couchman may be deemed to beneficially own Shares of Common Stock owned by Myrexis.
- 3. 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.
- 4. 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.
- 5. Represents Shares owned directly by Myrexis. Mr. Couchman is Chief Executive Officer of Myrexis. By virtue of this relationship, Mr. Couchman may be deemed to beneficially own the Shares owned directly by Myrexis. Mr. Couchman expressly disclaims beneficial ownership of such Shares except to the extent of his pecuniary interest therein.
- 6. Represents shares owned directly by HAM. Mr. Harper is the President of HAM. By virtue of this relationship, Mr. Harper may be deemed to beneficially own the Shares owned directly by HAM. Mr. Harper expressly disclaims beneficial ownership of such Shares except to the extent of his pecuniary interest therein.
- 7. Represents shares owned directly by Michael Pearce. Mr. Pearce expressly disclaims beneficial ownership of such Shares except to the extent of his pecuniary interest therein.

/s/ Jonathan Couchman	08/06/2020
Couchman Family Fund; By: /s/ Jonathan Couchman, Trustee	08/06/2020
Xstelos Corp.; By: /s/ Jonathan Couchman, Chief Executive Officer	08/06/2020
Myrexis, Inc.; By: /s/ Jonathan Couchman, Chief Executive Officer	08/06/2020
/s/ Jonathan Couchman, attorney-in-fact for Brian Harper	08/06/2020
Harper Asset Management, LLC; By: /s/ Brian Harper	08/06/2020
/s/ Jonathan Couchman, attorney-in-fact for Michael Pearce	08/06/2020
** Signature of Reporting Person	Date

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

- $^{\star}$  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).

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.