FORM 4	4
--------	---

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

(Print or Type Perpenses)

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

### STATEMENT OF CHANGES IN 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

(Print or Type Responses)												
1. Name and Address of Reporting P KASTEN BERNARD L	2. Issuer Name <b>and</b> Ticker or Trading Symbol ENZO BIOCHEM INC [ENZ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director10% Owner					
(Last) (First) C/O ENZO BIOCHEM, INC. AVENUE	3. Date of Earliest Transaction (Month/Day/Year) 10/23/2014						Officer (give title below)	Other (specify b	below)			
(Street) NEW YORK, NY 10022	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State)	(Zip)	Ta	ble I - Nor	1-Der	vivative S	ecuritie	es Acqui	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	Date Execution Date, if Code (A) or Disposed of (I (Month/Day/Year) any (Instr. 8) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities 6. 7. Natu   Beneficially Owned Following Ownership of Indi   Reported Transaction(s) Form: Benefi								
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Ownership (Instr. 4)		
Common Stock, par value \$0.01	10/23/2014		S		3,067	D	\$ 4.907	55,615	D			
Common Stock, par value \$0.01	10/23/2014		S		333	D	\$ 4.907	55,282	D			
Common Stock, par value \$0.01	10/24/2014		S		5,000	D	\$ 4.95	50,282	D			
Common Stock, par value \$0.01	10/24/2014		S		5,000	D	\$ 4.941	45,282	D			
Common Stock, par value \$0.01	10/24/2014		S		2,500	D	\$ 4.93	42,782	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 SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

			(c.g.,	Juits, cans	,	ai i aii	us, op	tions, conver	ubic securi	inco)		-			
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Numl	ber	and Expiration	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	rities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			0	Direct (D)	
						(A) o	r						Reported	or Indirect	
						Dispo	osed						Transaction(s)	(I)	
						of (D	· · · · · · · · · · · · · · · · · · ·						(Instr. 4)	(Instr. 4)	
						(Instr									
						4, and	15)								
											Amount				
								<b>D</b> .	<b>T</b>		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships					
	Director	10% Owner	Officer	Other		
Reporting Owner Name / Address						

KASTEN BERNARD L C/O ENZO BIOCHEM, INC. 527 MADISON AVENUE NEW YORK, NY 10022	Х			
--	---	--	--	--

## Signatures

/s/ Bernard Kasten	11/12/2014
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).

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.