# FORM 4

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

OMB APPRO	IVAL
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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 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 Person * Hanna Bruce A.			2. Issuer Name and Ticker or Trading Symbol ENZO BIOCHEM INC [ENZ]						X1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director10% Owner					
(Last) (First) (Middle) C/O ENZO BIOCHEM INC., 527 MADISON AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 01/05/2018						Officer (give t	itle below)	Other	(specify below	)
(Street) NEW YORK, NY 10022				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Fo	6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					Acquired, I	dired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Title of Security astr. 3)  2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, any (Month/Day/Yes		Date, if	Cod (Ins	de (Astr. 8)	Securities Acquir (a) or Disposed of onstr. 3, 4 and 5)	ed 5. Amount of Se			eficially 6 C F D o (I	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder:									who respond	to the colle	ection of i	ntormatio	n contained	SEC /	474 (9-02)
			Table I					in this f a currer cquired, Dispo	orm are not req tly valid OMB of sed of, or Benefic evertible securition	uired to recontrol num	spond ur nber.			s	
1. Title of		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	(e.g., p	tion	<b>calls, wa</b> 5. Number	er er ntive s l (A) sed	in this f a currer cquired, Dispo nts, options, cou 6. Date Exerci Expiration Dat (Month/Day/Y	orm are not req tly valid OMB of sed of, or Benefic evertible securities sable and	uired to recontrol num	spond ur nber. d l Amount ing	8. Price of	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., p	tion	5. Number of Deriva Securities Acquired or Dispos of (D) (Instr. 3,	er er ntive s l (A) sed	in this f a currer cquired, Dispo nts, options, cou 6. Date Exerci Expiration Dat (Month/Day/Y	orm are not req tly valid OMB of sed of, or Benefic evertible securities sable and	cially Owned es) 7. Title and of Underlying Securities	spond ur nber. d l Amount ing	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	of Indirect Beneficia Ownershi (Instr. 4)

### **Reporting Owners**

P ( 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Hanna Bruce A. C/O ENZO BIOCHEM INC. 527 MADISON AVENUE NEW YORK, NY 10022	X					

### **Signatures**

/s/ Bruce A. Hanna	01/09/2018
**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).
- (1) The Reporting Person was granted 36,860, stock options. The options have a five-year term and shall vest in two equal annual tranches, beginning January 06, 2019.

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.