Cotroneo Pat Form 4 June 15, 2018

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Shington, D.C. 20549

Number:

January 31,

Expires:

Table I Non Darivetive Securities Acquired Disposed of ar Repositionally Owned

Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

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(City)

(State)

(Zip)

(Print or Type Responses)

1. Name and Address of Reporting Person * Cotroneo Pat			2. Issuer Name and Ticker or Trading Symbol FIBROGEN INC [FGEN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)		
			(Month/Day/Year)	Director 10% Owner		
C/O FIBROGEN, INC., 409 ILLINOIS ST.			06/13/2018	_X_ Officer (give title Other (specifically)		
12211 (010 01)				SVP, Finance and CFO		
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
SAN FRANCIS	SCO, CA 94	1158	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(******)	1 able	e 1 - Non-D	erivative	Securi	ities Acc	Juirea, Disposea (oi, or Beneficial	ly Ownea
2. Transaction Date	2A. Deemed	3.	4. Securi	ities A	cquired	5. Amount of	6. Ownership	7. Nature of
(Month/Day/Year)	Execution Date, if	Transactio	on(A) or D	ispose	d of	Securities	Form: Direct	Indirect
	any	Code	(D)			Beneficially	(D) or	Beneficial
	(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned	Indirect (I)	Ownership
						Following	(Instr. 4)	(Instr. 4)
				(A)		Reported		
						` '		
		Code V	Amount		Price	(Instr. 3 and 4)		
0.6/4.0/0.4.0		~	2,319		\$	221 = 21	_	
06/13/2018		S		D		224,704	D	
			_		5 , . ,			
06/14/2019		М	7.750	٨	\$	222 454	D	
00/14/2016		IVI	1,130	A	25.4	232,434	D	
			7.750					
06/14/2018		S		D	\$ 60	224 704	D	
00/1 // 2010			(1)		Ψ 00	22 1,7 3 1		
	2. Transaction Date	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year) 06/13/2018 06/14/2018	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (Instr. 3 and 4) (Instr. 4) Code V Amount (D) Price (Instr. 3 and 4)				

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

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number.

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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. Transactic Code (Instr. 8)	Transaction Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 25.4	06/14/2018		M	7,750	<u>(2)</u>	03/08/2027	Common Stock	7,750	

Reporting Owners

Panarting Owner Name / Address	Relationships

Director 10% Owner Officer Other

Cotroneo Pat

C/O FIBROGEN, INC. 409 ILLINOIS ST.

SVP, Finance and CFO

SAN FRANCISCO, CA 94158

Signatures

/s/ Michael Lowenstein, Attorney-in-fact

06/15/2018

**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) Shares sold pursuant to a 10b5-1 plan.
- (2) Twenty-five percent of the shares subject to the option vests on the first anniversary of the vesting commencement date, and the remainder vests in equal amounts quarterly thereafter for the following three years.

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.

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