FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

Cotroneo Pat				<u>Fl</u> _	FIBROGEN INC [FGEN]								eck all applic Directo	-		10% Ov Other (s		
(Last) (First) (Middle) C/O FIBROGEN, INC. 409 ILLINOIS ST.					3. Date of Earliest Transaction (Month/Day/Year) 01/22/2018								helow)		ce an	below)	poony	
(Street) SAN FRANCI	sco C	A	94158		_ 4. _	4. If Amendment, Date of Original					of Original Filed (Month/Day/Year)				dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(5		(Zip)															
		Tab	le I - No	on-Deri	ivativ	e Se	curi	ties Ac	quired,	Di	sposed o	f, or Be	neficial	ly Owned				
1. Title of Security (Instr. 3)		Date (Month/Day/Year)		r) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					Benefici	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 01.			01/22	2/2018	2018			М		25,000	A	\$18	208	8,852		D		
Common Stock 01			01/22	2/2018	2018		S		11,802(1) D	\$48.28	(2) 197	197,050		D			
Common Stock 01/22/			2/2018	2018		S		13,198 ⁽¹) D	\$49.11	(3) 183	183,852		D				
		-	Table II								oosed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Date,		4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e Or S Fo Illy Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	Code V		(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares	per				
Stock Option (Right to Buy)	\$18	01/22/2018			M			25,000	(4)		11/13/2024	Common Stock	25,000	\$0.00	31,000)	D	

Explanation of Responses:

- 1. Shares sold pursuant to a 10b5-1 plan.
- 2. The shares were sold at prices ranging from \$47.80 to \$48.70. The reporting person will provide upon request to the SEC, the issuer or security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 3. The shares were sold at prices ranging from \$48.80 to \$49.35. The reporting person will provide upon request to the SEC, the issuer or security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 4. 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

Remarks:

/s/ Dorothy Pacini, Attorney-infact

01/24/2018

** Signature of Reporting Person

Date

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

- * 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.