The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

				OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D Notice of Exempt Offering of Securities			OMB 3235- Number: 0076 Estimated average burden hours per 4.00			
				response: 4.00		
1. Issuer's Identity						
CIK (Filer ID Nu	mber) Previous Names	X None		Entity Type		
<u>0000921299</u>			X Corporat	ion		
Name of Issu	er		Limited	Partnership		
FIBROGEN INC			Limited	Liability Company		
Jurisdiction				General Partnership		
Incorporation/Organization DELAWARE				Business Trust		
	ation/Organization		Other (S	pecify)		
X Over Five Years Ago						
Within Last Five Years (	Specify Year)					
Yet to Be Formed						
2. Principal Place of Busine	ss and Contact Information					
-	of Issuer					
FIBROGEN INC						
	Address 1		Street Address 2			
409 ILLINOIS STREET						
City	State/Province/Countr	5		imber of Issuer		
SAN FRANCISCO	CALIFORNIA	94158	415-978-12	200		
3. Related Persons						
Last Name		rst Name	Middle N	Name		
Neff	Thomas		В.			
Street Address 1		t Address 2				
c/o FibroGen, Inc.	409 Illinois St.		71D/D.	lCada		
City		ovince/Country	ZIP/Posta	ucode		
San Francisco <b>Palationshin:</b> X Executive	CALIFORNIA Officer X Director Brome	ator	94158			
<b>Relationship:</b> X Executive		תפו				
Clarification of Response (i						
Last Name		rst Name	Middle N	Name		
Cotroneo	Pat					
Street Address 1	Stree	t Address 2				

**ZIP/PostalCode** 

94158

c/o FibroGen, Inc. 409 Illinois St. City State/Pro

CityState/Province/CountrySan FranciscoCALIFORNIARelationship: X Executive OfficerDirectorPromoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Valone	Frank	Н.
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> X Executive Offic	er Director Promoter	
Clarification of Response (if Nece	essary):	
Last Name	First Name	Middle Name
Yu	K. Peony	
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> X Executive Offic	er Director Promoter	
Clarification of Response (if Nece	essary):	
Last Name	First Name	Middle Name
Kearns	Thomas	F.
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> Executive Office		54150
Clarification of Response (if Nece		
Last Name	First Name	Middle Name
Kurkijarvi	Kalevi	
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> Executive Office	er X Director Promoter	
Clarification of Response (if Nece	essary):	
Last Name	First Name	Middle Name
Madero	Miguel	
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> Executive Office		
Clarification of Response (if Nece		
Last Name	First Name	Middle Name
Riggs	Rory	В.
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco		

CALIFORNIA

94158

San Francisco

## Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Rosenkranz	Roberto	Pedro
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> Executive Office	er X Director Promoter	
Clarification of Response (if Nece	essary):	
Last Name	First Name	Middle Name
Routti	Jorma	
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> Executive Office	r X Director Promoter	
Clarification of Response (if Nece	essary):	
Last Name	First Name	Middle Name
Schoeneck	James	А.
Street Address 1	Street Address 2	
c/o FibroGen, Inc.	409 Illinois St.	
City	State/Province/Country	ZIP/PostalCode
San Francisco	CALIFORNIA	94158
<b>Relationship:</b> Executive Office	r X Director Promoter	
Clarification of Response (if Nece	essary):	
Last Name	First Name	Middle Name
Lust Hume	1 Hot Fullic	Tritudie Truttie
Stern	Julian	N.
Stern Street Address 1	Julian Street Address 2	
Stern <b>Street Address 1</b> c/o FibroGen, Inc.	Julian <b>Street Address 2</b> 409 Illinois St.	N.
Stern <b>Street Address 1</b> c/o FibroGen, Inc. <b>City</b>	Julian Street Address 2 409 Illinois St. State/Province/Country	N. ZIP/PostalCode
Stern <b>Street Address 1</b> c/o FibroGen, Inc. <b>City</b> San Francisco	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA	N.
Stern <b>Street Address 1</b> c/o FibroGen, Inc. <b>City</b>	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA	N. ZIP/PostalCode
Stern <b>Street Address 1</b> c/o FibroGen, Inc. <b>City</b> San Francisco	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA or X Director Promoter	N. ZIP/PostalCode
Stern Street Address 1 c/o FibroGen, Inc. City San Francisco Relationship: Executive Office	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA or X Director Promoter essary): First Name	N. ZIP/PostalCode
Stern Street Address 1 c/o FibroGen, Inc. City San Francisco Relationship: Executive Office Clarification of Response (if Nece Last Name Tamura	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA er X Director Promoter essary): First Name Toshinari	N. <b>ZIP/PostalCode</b> 94158
Stern Street Address 1 c/o FibroGen, Inc. City San Francisco Relationship: Executive Office Clarification of Response (if Nece Last Name Tamura Street Address 1	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA TX Director Promoter Ssary): First Name Toshinari Street Address 2	N. <b>ZIP/PostalCode</b> 94158
Stern Street Address 1 c/o FibroGen, Inc. City San Francisco Relationship: Executive Office Clarification of Response (if Nece Last Name Tamura Street Address 1 c/o FibroGen, Inc.	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA er X Director Promoter essary): First Name Toshinari Street Address 2 409 Illinois St.	N. ZIP/PostalCode 94158 Middle Name
Stern Street Address 1 c/o FibroGen, Inc. City San Francisco Relationship: Executive Office Clarification of Response (if Nece Last Name Tamura Street Address 1	Julian Street Address 2 409 Illinois St. State/Province/Country CALIFORNIA TX Director Promoter Ssary): First Name Toshinari Street Address 2	N. <b>ZIP/PostalCode</b> 94158

Clarification of Response (if Necessary):

Agriculture		Health Care
Banking & Financial S	ervices	Biotechnology
Commercial Banking	g	Health Insurance
Insurance Investing		Hospitals & Physicians
Investment Banking		X Pharmaceuticals
Pooled Investment Fund		Other Health Care
Is the issuer registere an investment comp the Investment Comp Act of 1940?	any under	Manufacturing Real Estate Commercial
Yes	No	Construction
Other Banking & Fin	nancial Services	<b>REITS &amp; Finance</b>
<b>Business Services</b>		Residential
Energy		Other Real Estate
Coal Mining		
Electric Utilities		
Energy Conservation	1	
Environmental Servi	ices	
Oil & Gas		
Other Energy		

Retailing Restaurants Technology Computers Telecommunications Other Technology Travel Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Travel

## 5. Issuer Size

<b>Revenue Range</b>	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company Act Section 3(c)	
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)
Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii)	Section 3(c)(2)	Section 3(c)(10)
Rule 504 (b)(1)(iii)	Section 3(c)(3)	Section 3(c)(11)
Rule 505	Section 3(c)(4)	Section 3(c)(12)
X Rule 506(b) Rule 506(c)	Section 3(c)(5)	Section 3(c)(13)
Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)
	Section 3(c)(7)	

## 7. Type of Filing

- X New Notice Date of First Sale 2014-11-19 First Sale Yet to Occur Amendment
- 8. Duration of Offering

Does the Issuer intend this offering to last more than one year?	Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
X Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Other (describe)	
10. Business Combination Transaction		
Is this offering being made in connection with a business combinat a merger, acquisition or exchange offer?	tion transaction, such as Yes X No	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor \$0 USD		
12. Sales Compensation		
Recipient Recipi	ent CRD Number X None	
(Associated) Broker or Dealer X None (Assoc	ciated) Broker or Dealer CRD Number X None	
Street Address 1	Street Address 2	
State(s) of Solicitation (select all that apply)	rovince/Country ign/non-US	ZIP/Postal Code
13. Offering and Sales Amounts		
Total Offering Amount\$20,000,000 USD orIndefiniteTotal Amount Sold\$20,000,000 USDTotal Remaining to be Sold\$0 USD orIndefinite		
Total Offering Amount\$20,000,000 USD orIndefiniteTotal Amount Sold\$20,000,000 USD		
Total Offering Amount\$20,000,000 USD orIndefiniteTotal Amount Sold\$20,000,000 USDTotal Remaining to be Sold\$0 USD orIndefinite		
Total Offering Amount\$20,000,000 USD orIndefiniteTotal Amount Sold\$20,000,000 USDTotal Remaining to be Sold\$0 USD orIndefiniteClarification of Response (if Necessary):	s who already have invested in the offering. ay be sold to persons who do not qualify as	1
Total Offering Amount       \$20,000,000 USD or Indefinite         Total Amount Sold       \$20,000,000 USD         Total Remaining to be Sold       \$0 USD or Indefinite         Clarification of Response (if Necessary):         14. Investors         Select if securities in the offering have been or may be sold to p investors, and enter the number of such non-accredited investors         Regardless of whether securities in the offering have been or may	s who already have invested in the offering. ay be sold to persons who do not qualify as	1
Total Offering Amount       \$20,000,000 USD or Indefinite         Total Amount Sold       \$20,000,000 USD         Total Remaining to be Sold       \$0 USD or Indefinite         Clarification of Response (if Necessary):         14. Investors         Select if securities in the offering have been or may be sold to p investors, and enter the number of such non-accredited investors         Regardless of whether securities in the offering have been or may accredited investors, enter the total number of investors who alr	s who already have invested in the offering. ay be sold to persons who do not qualify as ready have invested in the offering:	 1 liture is not

Clarification of Response (if Necessary):

16. Use of Proceeds

Finders' Fees

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

Estimate

\$0 USD

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
FIBROGEN INC	/s/ Pat Cotroneo	Pat Cotroneo	Chief Financial Officer	2014-12-08

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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.