FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasnington,	D.C.	20549	

Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

1. Name an		Reporting Person							er or Tra		Symbol					all app Direct	blicable) ctor er (give title	Other	Owner (specify
(Last) (First) (Middle) C/O FIBROGEN, INC. 409 ILLINOIS ST.						3. Date of Earliest Transaction (Month/Day/Year) 12/01/2016										below) below) Chief Medical Officer			
(Street) SAN FRANCI (City)			94158 Zip)		4. If	Ame	endment,	Date of	f Original	l Filed	I (Month/Da	ay/Yea	ar)		. Indivi ine) X	Form	n filed by One n filed by Mor	e Reporting Perset han One Rep	son
		Tabl	e I - Non	-Deriv	ative	Se	curitie	s Acc	uired,	Dis	posed o	f, or	r Ben	eficia	ally (Owne	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ay/Year) Executi		. Deemed ecution Date, iny onth/Day/Year)				ies Acquired (A) Of (D) (Instr. 3, 4			l and Sec Ben		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(11301. 4)
Common	on Stock 12/01/2016 F 1,410 ⁽¹⁾ D \$20.55						5 209,792		D										
		Та	ible II - D								sed of, onvertib				y Ov	vned			
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/Ye	Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisa Expiration Date (Month/Day/Yea		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount		vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	of	nber ires					

Explanation of Responses:

1. Represents shares withheld by the issuer to satisfy a tax obligation realized by the reporting person upon the vesting of restricted stock units.

Remarks:

/s/ Dorothy Pacini, Attorney-

12/02/2016

in-fact

** 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.