FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Section	on 30(h)	of the	Investm	ent Co	mpany Act	of 19	40							
1. Name and Address of Reporting Person* VALONE FRANK H MD					2. Issuer Name and Ticker or Trading Symbol FIBROGEN INC [FGEN]														wner	
(Last) (First) (Middle) C/O FIBROGEN, INC. 409 ILLINOIS ST.					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2015									X Officer (give title Other (speci below) below) Chief Medical Officer						
(Street) SAN FRANCI (City)			04158 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (ChecLine) X Form filed by One Reporting Form filed by More than One Person									ing Pers	on					
		Tabl	e I - Nor	ı-Deriv	ative	Se	curitie	s Ac	quired	l, Dis	sposed o	f, o	r Ben	eficia	ally C)wne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				n/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disp Code (Instr. 5)		n Disposed	ecurities Acquired (A osed Of (D) (Instr. 3,			nd S	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	e v	Amount		(A) or (D)	Price	. [7		ed ction(s) 3 and 4)			(Instr. 4)
Common	ommon Stock 06/0			06/0	1/2015				F		704		D	\$17	7.5 84,748		4,748	I)	
		Та									osed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date, Transact Code (In:					6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	m: ect (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nui of	ount mber ires						

Explanation of Responses:

Remarks:

/s/ John Alden, Attorney-in-

<u>fact</u>

idet

** Signature of Reporting Person Date

06/02/2015

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.