FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| | Estimated average burden | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | |

| | Check this box if no longer subject to |
|---|----------------------------------------|
| ١ | Section 16. Form 4 or Form 5 |
| ı | obligations may continue. See |
| | Instruction 1(h) |

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 and Address of Reporting Person* PEREZ ROBERT J | | | | 2. Issuer Name and Ticker or Trading Symbol ZAFGEN, INC. [ZFGN] | | | | | | | | | | all applic | onship of Reporting all applicable) Director | | on(s) to Iss | | | |
|----------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------|------|----------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------|------------------|------------------------------|-----------------|--------------------------------------|----------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--|
| (Last) (First) (Middle) C/O ZAFGEN, INC., | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/26/2019 | | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | | |
| 3 CENTER PLAZA, SUITE 610 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) BOSTO! | | | 02108 (Zip) | | | | | | | | | | Li | ne) X | | led by Mor | | orting Person | | |
| | | Tab | le I - Non- | -Deriva | ative | e Se | curities | s Ac | quired, D | isp | osed o | f, or Be | neficia | ılly (| Owned | | | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | | 4 and Securitie Beneficia | | es Formally (D) (Following (I) (I | | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | Code V | , | Amount | (A) or (D) Price | | | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| | | - | Γable II - D (ε | | | | | | uired, Dis , options | | | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | Date, Trans Code | | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisab Expiration Date (Month/Day/Year) | | of Securities | | ies g Security | Do | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ily | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | v | (A) | (D) | Date Exercisable | Ex Da | piration tte | Title | Amoun or Numbe of Shares | r | | | | | | |
| Stock Option (Right to Buy) | \$1.25 | 06/26/2019 | | I | A | | 27,000 | | (1) | 06 | /26/2029 | Common Stock | 27,000 | 0 | \$0.00 | 27,000 |) | D | | |

Explanation of Responses:

1. These options were issued under the nonemployee director compensation policy and will vest in full upon the earlier of June 26, 2020 or the date of the 2020 annual meeting of stockholders, subject to the director's continued service on the board of directors, provided that, all shares shall become fully vested upon a change in control of the Company.

Remarks:

/s/ Shoaib Ghias, Attorney-In-

Fact

** Signature of Reporting Person

Date

06/27/2019

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.