FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

EMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

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1. Name and Address of Reporting Person* EVERETT WENDY					2. Issuer Name and Ticker or Trading Symbol ZAFGEN, INC. [ZFGN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
														X Director			10% Owner		
(Last)	(F FGEN, INC	irst)		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2018									Officer (give title Other (specify below) below)						
175 PORTLAND STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) BOSTON MA 02114					The state of the s									Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tab	le I - Non-	-Deriva	ative	Se	curities	Ac	quired, D	ispo	osed o	f, or Be	neficial	ly Owned	l				
Date			2. Transa Date (Month/Da		ır) I	A. Deemed Execution Date, f any Month/Day/Year)		Code (Ins	Transaction Disposed O Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	. ,	Amount	(A) or (D) Pri		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
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/	Co	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Year		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Co	ode \	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$6.79	06/06/2018		,	A		20,000		(1)	06/	06/2028	Common Stock	20,000	\$0.00	20,00	0	D		
Stock Option (Right to	\$6.79	06/06/2018			A		40,000		(2)	06/	06/2028	Common Stock	40,000	\$0.00	40,00	0	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 6, 2019 or the date of the 2019 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.
- 2. These options were issued under the nonemployee director compensation policy and will vest monthly over a three year period beginning on the grant date subject to the director's continued service on the board of directors, and provided that, all shares shall become fully vested upon a change in control of the Company.

Remarks:

/s/ Shoaib Ghias, Attorney-In-06/07/2018 **Fact**

** Signature of Reporting Person

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.