FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVA	Ά	V	റ	R	Р	Р	Α	ЛB	Λ	Ω	
-------------	---	---	---	---	---	---	---	----	---	---	--

OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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 Addres	s of Reporting Perso	n*	2. Issuer Name and Ticker or Trading Symbol FibroBiologics, Inc. [FBLG]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
OTILLICIVI	LIL			X	Director	10% Owner		
(Last)	(First)	(Middle)		X	Officer (give title below)	Other (specify below)		
C/O FIBROBIOLOGICS, INC.			3. Date of Earliest Transaction (Month/Day/Year) 12/09/2024		Chief Executi	ve Officer		
455 E. MEDICA	L CENTER BLV	D. SUITE 300						
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing	(Check Applicable Line)		
HOUSTON	TX	77598		X	Form filed by One Rep	orting Person		
			-		Form filed by More tha	n One Reporting Person		
(City)	(State)	(Zip)						

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(IIISU. 4)
Common Stock	12/09/2024		G		100,000	D	\$0	5,906,647	D	

## 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 Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		Derivative Ex		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		erivative ecurities (Month/Day/Year) cquired (A) r Disposed of b) (Instr. 3, 4		d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Ownership Form: I	11. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)					

Explanation of Responses:

/s/ Ruben A. Garcia, by Power of

Attorney

\*\* Signature of Reporting Person

12/09/2024 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $Note: File three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$ 

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).