FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-										
Estimated average burden										
l .										

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

					OI	i Seci	1011 30(11) (	or the	investme	int CC	ompany Act	01 1940							
1. Name and Address of Reporting Person* Fong Bryant					2. Issuer Name and Ticker or Trading Symbol ADMA BIOLOGICS, INC. [ ADMA ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
I One D	<u>i yant</u>													X Directo	or		10% C	wner	
(Last) C/O AD	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/06/2023									Officer (give title Other (spec below) below)				
465 STATE ROUTE 17					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					-								Lii	ne) X Form f	ilad by O	no Pon	orting Pers	n	
RAMSE	Y N	J	07446												iled by M		n One Rep		
(City)	(S	itate)	(Zip)																
		Tak	ole I - No	n-Deri	vativ	e Se	curities	s Ac	quired	, Dis	sposed o	f, or Be	neficia	lly Owned					
Diam's (mains)			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 5					Beneficial Owned Fo	lly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transaction	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 03/06				03/06	/2023	3					25,815(	1) A	\$0	59,901(2)		D			
Common Stock												1,433,304		I		See Footnote <sup>(3)</sup>			
			Table II								osed of, convertil			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	n Date,	4. Transa Code ( 8)		ı of		6. Date Exercisab Expiration Date (Month/Day/Year)		te of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivati Securiti Benefic Owned Followir Reporte Transac (Instr. 4)	ve ies ially ng ed ction(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to	\$3.35	03/06/2023			A		51,630		(4)		03/06/2033	Common Stock	51,630	\$0	51,6	530	D		

## **Explanation of Responses:**

- 1. These shares represent restricted stock units ("RSUs") that will vest in two equal installments, on the six- and 12-month anniversaries of the grant date, becoming fully vested on the one-year anniversary of the grant date, subject to the reporting person's continued service as of the applicable vesting date.
- 2. Includes, as of the transaction date, (i) 25,815 RSUs granted on March 6, 2023 and reported on this Form 4, subject to vesting as set forth in footnote (1); (ii) 13,293 RSUs granted on March 7, 2022, which will vest in full on March 7, 2023; and (iii) 20,793 shares of common stock owned by the reporting person.
- 3. Represents shares held by Biomark Capital Fund ("Biomark Capital"). Mr. Fong is a Managing Director and General Partner at Biomark Capital and may be deemed the beneficial owner of such shares.
- 4. The options vest in 12 equal monthly installments, becoming fully vested on the one-year anniversary of the date of grant.

/s/ Bryant Fong, by Brian Lenz as Attorney-in-fact

03/08/2023

\*\* 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.