FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIA	<b>AL OWNERSHIP</b>

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response: 0.								

11. Nature of Indirect Beneficial Ownership (Instr. 4)

See Footnote<sup>(2)</sup>

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

51 ASTOR PLACE, 10TH FLOOR

(Street)

	ction 1(b).	nue. See		Filed	d purs	uant to s	Sect	ion 16(	a) of the	Secu	rities Exchang	ge Act of	1934		noi	urs per i	response:	0.9		
					or	Section	30(h	) of the	Ínvestr	nent C	Company Act o									
1. Name and Address of Reporting Person* PERCEPTIVE ADVISORS LLC					2. Issuer Name and Ticker or Trading Symbol ADMA BIOLOGICS, INC. [ ADMA ]  5. Relationship of (Check all applica										Reporting Person(s) to Issuer ble)					
PERCEPTIVE ADVISORS LLC							020	010	<u> </u>	<u></u> [ 1151.1			Direc			_	Owner			
(Last) (First) (Middle)							est Tra	nsactior	ı (Mon	th/Day/Year)			Officer (give title Other (specif below) below)							
' '	OR PLACE	, 10TH FLOOR			09	/23/202	21													
-					4. 1	f Amenc	dmer	nt, Date	of Orig	inal Fi	iled (Month/Da	ay/Year)		Individual o	r Joint/Gr	oup Fili	ing (Chec	k Applicable		
(Street)	OD17												Lir	ne) Form	filed by 0	One Re	porting P	erson		
NEW Y	ORK N	Y	10003											Form filed by One Reporting Person  X Form filed by More than One Reporting Person						
(City)	(St	ate) (	Zip)											Perso	וזכ					
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			2. Transacti Date (Month/Day)		2A. Deemed Execution Date, ir) if any		3. Transa	action (Instr.						Form:		7. Nature o Indirect Beneficial				
				(World I/Day)	icaij			h/Day/Year)		(111301.	37				Following d tion(s)		str. 4)	Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Price		Transact (Instr. 3				, ,		
	0: 1			00/02/0	204						700.000		04.05(	1) 44.000.070		, Se		See		
Common	Stock			09/23/20	)21				S		780,000	D	\$1.27	14,02	2,978		I F	Footnote		
		Ta	ble II	I - Derivat	ive S	Securi	ties	s Acq	uired	, Dis	posed of,	or Be	neficial	ly Owne	d	,				
				(e.g., pı	uts,	calls,	wai	rrants	s, opti	ons,	convertib	le sec	urities	)						
1. Title of Derivative	2. Conversion			Deemed cution Date,	4. Transaction		5. Number		Expi	ration		7. Title Amou	nt of	8. Price of Derivative	9. Numbe derivative		10. Ownersi			
Security or Exercise (Instr. 3) Price of		(Month/Day/Year)	if any (Mon	y nth/Day/Year)	Code 8)	Code (Instr. 8)		erivative ecurities	s   `	ith/Day	//Year)	Securi Underl	ying	Security (Instr. 5)	Securitie Benefici		Form: Direct (E			
	Derivative Security							cquired ) or				Deriva Securi	ty (Instr.		Owned Following Reported		or Indire (I) (Instr.			
							of	sposed (D) str. 3, 4				3 and 4	+)		Transac (Instr. 4)	tion(s)				
								id 5)							(11150.4)					
													Amount or							
					l			.	Date		Expiration	1 1	Number of							
			<u>                                     </u>		Cod	₽ V	(A	) (D)	Exer	cisable	e Date	Title	Shares							
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NEW YORK	NY	10003
(City)	(State)	(Zip)

## **Explanation of Responses:**

- 1. The reported price is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$1.27 to \$1.28, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within such range.
- 2. The securities are directly held by Perceptive Life Sciences Master Fund Ltd. (the "Master Fund"). Perceptive Advisors LLC (the "Advisor") serves as the investment manager of Master Fund. Joseph Edelman is the managing member of the Advisor. Each of Mr. Edelman and the Advisor disclaims, for purposes of Section 16 of the Securities Exchange Act of 1934, beneficial ownership of such securities, except to the extent of his/its indirect pecuniary interest therein, and this report shall not be deemed an admission that either Mr. Edelman or the Advisor is the beneficial owner of such securities for purposes of Section 16 or for any other purposes.

/s/ Joseph Edelman - for Perceptive Life Sciences Master Fund Ltd., By:

Perceptive Advisors LLC, its 09/28/2021

<u>investment manager, By:</u> <u>Joseph Edelman, its managing</u>

memher

/s/ Joseph Edelman - for

Perceptive Advisors LLC, By:

Joseph Edelman, its managing

<u>member</u>

/s/ Joseph Edelman

09/28/2021

\*\* Signature of Reporting Person Date

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

- \* 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.