FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
		2005 2005							
	OMB Number: 3235-028 Estimated average burden								
	hours per response:	0.5							

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

	tion 1(b).			File		t to Section 16(a tion 30(h) of the						4		liouis	per respons		0.5
1. Name and Address of Reporting Person* Fong Bryant				2. Issuer Name <b>and</b> Ticker or Trading Symbol ADMA BIOLOGICS, INC. [ ADMA ]						(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/26/2024								(give title		Other (spelow)		
C/O ADMA BIOLOGICS, INC. 465 STATE ROUTE 17				4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person							
(Street) RAMSEY NJ 07446												Form fi	Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Tak	le I - No	n-Deriv	ative Se	ecurities Ac	quired,	Disp	osed o	f, o	r Bene	ficiall	y Owned				
1. Title of Security (Instr. 3)  2. Trans: Date (Month/L			action 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Of (D) Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4				s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	nount (A) or (D)		Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common	Stock			02/26	5/2024		A		24,040	<b>)</b> (1)	A	\$ <mark>0</mark>	\$0 83,941 <sup>(2)</sup> D				
		•	Table II -			curities Acquis, warrants							Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise (Instr. 3)  2. Conversion or Exercise (Month/Day/Year)  3. Transaction Date (Execution Date, if any (Month/Day/Year)		Date, T	ransaction ode (Instr.		Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)			ecurity	8. Price of Derivative Security (Instr. 5)	rivative derivative curity Securities		nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

\$5.4

Stock Option

(right to buy)

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.

(D)

Date Exercisable

(3)

Expiration Date

02/26/2034

Title

Stock

- 2. Includes, as of the transaction date, (i) 24,040 RSUs granted on February 26, 2024 and reported on this Form 4, subject to vesting as set forth in footnote (1); (ii) 25,815 RSUs granted on March 6, 2023, which will vest in full on March 6, 2024; and (iii) 34,086 shares of common stock owned by the reporting person.
- 3. 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

Amount or Number

Shares

37.541

\$0

02/28/2024

37,541

D

\*\* 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).

02/26/2024

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

Code ν

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(A)

37,541

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.