FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

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

STATEMENT 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

1. Name and Address of Reporting Person* LENZ BRIAN					2. Issuer Name and Ticker or Trading Symbol ADMA BIOLOGICS, INC. [ADMA]									Check	ionship of Reportin all applicable) Director Officer (give title		109	S Issuer 6 Owner er (specify	
(Last) (First) (Middle) C/O ADMA BIOLOGICS, INC. 465 STATE ROUTE 17						3. Date of Earliest Transaction (Month/Day/Year) 03/16/2015									X	belov	v) ``	bel ncial Office	,
(Street))				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																
		Tabl	e I - Noi	n-Deriv	ative	Se	curitie	s Acq	μired,	Dis	posed o	f, o	r Ben	eficia	ally (Owne	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execu Day/Year) if any		2A. Deemed Execution Date, f any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			4 and Se Be Ov		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect
									Code	v	Amount		(A) or (D)	Price			action(s) 3 and 4)		(111341. 4)
Common Stock, \$0.0001 par value per share 03/					/16/2015				P		1,250	50 A \$		\$7.9	969	9 4,250		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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) Execution Date,		Date,	4. Transaction Code (Instr. 8)		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	nt		ive derivative y Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)		Date Exercisal		Expiration Date	Title	of	nber ares					

Explanation of Responses:

/s/ Brian Lenz

03/18/2015

Date

** 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.