## FORM 3

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPRO	VAL	
OMB	3235-	
Number:	0104	
Estimated average		
burden hours pe		
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

(Print or Type Responses)							
1. Name and Address of Reporting Person *- BASSETT PAMELA	Statement (Month/Day/Year) 04/01/2010 4.		3. Issuer Name and Ticker or Trading Symbol iBio, Inc. [IBPM.OB]				
(Last) (First) (Middle) C/O IBIO, INC., 9 INNOVATION WAY, SUITE 100			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director Officer (give Other (specify title below) below)		Filed(Mor	5. If Amendment, Date 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	
(Street) NEWARK, DE 19711					6. Individual Filing(Ch _X_ Form f Form f		
(City) (State) (Zip)	(City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)		2. Amount of S Beneficially Ow (Instr. 4)			4. Nature of Ind Ownership (Instr. 5)	irect Beneficial	
Reminder: Report on a separate line for each persons who respondence required to respondence.  Table II - Derivative Security	pond to the co and unless the	ollection of in e form display	oformation ys a currer	contained in ntly valid OM	this form are B control		
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount Securities Underlyin Derivative Security (Instr. 4)				6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Da Ex	Expiration Sable Date	n Title	Amount or Number of Shares	~	Security: Direct (D) or Indirect (I)		

Common

Stock

60,000

\$ 1.05

D

04/01/2020

#### **Reporting Owners**

Stock Option (right to buy)

Reporting Owner Name / Address	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
BASSETT PAMELA C/O IBIO, INC. 9 INNOVATION WAY, SUITE 100 NEWARK, DE 19711	X			

<u>(1)</u>

## **Signatures**

/s/ Pamela l	Bassett	04/07/2010	
**Signature of Re	eporting Person	Date	

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) The option vests in three equal annual installments, beginning on April 1, 2011.

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

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.