# FORM 4

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

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*  Maddux Randy Joe			2. Issuer Name and Ticker or Trading Symbol iBio, Inc. [IBIO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle) C/O IBIO, INC., 8800 HSC PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 08/23/2021											
(Street) BRYAN,, TX 77807			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ I	6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(Cit	**	(State)	(Zip)	Table I - Non-Derivative Securities Acc				Acquired,	, Disposed o	of, or Benef	icially Owne	d			
(Instr. 3) Date		2. Transaction Date (Month/Day/Year	Execu any			ansaction r. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(D) Own Tran	5. Amount of Securities Bo Owned Following Reporte Transaction(s)			Ownership Form:	Beneficial	
			(Mont	th/Day/Year)		ode V		() or D) Pr	(Inst	tr. 3 and 4)		or (I)	or Indirect	Ownership (Instr. 4)	
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							in this		ot requ	uired to ı	respond u				
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative		3A. Deemed Execution Date, if	4. Transact	5. Nun Deriva Securi Acqui or Dis	nber of tive ties red (A)	quired, Dis s, options, 6. Date E Expiratio (Month/I	posed of, or learning to the convertible services and a Date	ot requion of Section	uired to i control nu	Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned	f 10. Ownersh Form of Derivati Security	ip of Indire Benefic Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of	Date	3A. Deemed Execution Date, if any	4. Transact	5. Nur berive Securi Acqui	nber of tive ties red (A) posed o	quired, Dis s, options, 6. Date E Expiratio (Month/I	posed of, or learning to the convertible services and a Date	ot requion of Section	uired to not control not ially Own es)  Title and f Underlying curities	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially	f 10. Ownersh Form of Derivati Security Direct (I or Indire	ip of Indire Benefic Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	tion 5. Nun Deriva Securi Acqui or Dis (D) (Instr.	nber of tive ties red (A) posed of 3, 4,	quired, Diss, options, 6. Date Expiratio (Month/T	posed of, or loovertible so cercisable and hay year)  Expiration	OMB co  Beneficia ecurities  1 7. 7 Sec (In	uired to not control not ially Own es)  Title and f Underlying curities	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Nature of Indire Benefic (Instr. 4

### **Reporting Owners**

P ( 0 N /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Maddux Randy Joe C/O IBIO, INC. 8800 HSC PARKWAY BRYAN,, TX 77807			Chief Operating Officer		

# **Signatures**

/s/ Randy Joe Maddux	08/25/2021
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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).
- These options vest as follows: 25% of the shares of common stock underlying the options granted will vest on the one-year anniversary of the grant date and after the one-year anniversary of (1) the grant date, 6.25% of the shares of common stock underlying the options granted will vest for each additional three months of employment, provided that the reporting person remains employed by iBio, Inc.

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 no	ot required to respond unless the form displays a currently valid OMB number.