

REVOLUTIONIZING ACCESS TO CHIROPRACTIC CARE

INVESTOR PRESENTATION - Q1 2019

THE JOINT CORP. | NASDAQ: JYNT | thejoint.com

Safe Harbor Statements

Certain statements contained in this presentation are "forward-looking statements." We have tried to identify these forward-looking statements by using words such as "may," "might," " will," "expect," "anticipate," "believe," "could," " intend," "plan," "estimate," "should," "if," "project," and similar expressions. All statements other than statements of historical facts contained in this presentation, including statements regarding our growth strategies, our vision, future operations, future financial position, future revenue, projected costs, prospects, plans, objectives of management and expected market growth and potential are forward-looking statements. We have based these forward-looking statements on our current expectations and projections about future events. However, these forward-looking statements are subject to risks, uncertainties, assumptions and other factors that may cause our actual results, performance or achievements to be materially different from our expectations and projections. Some of these risks, uncertainties and other factors are set forth in this presentation and in other documents we file with the United States Securities and Exchange Commission (the "SEC"). Given these risks and uncertainties, readers are cautioned not to place undue reliance on our forward-looking statements. Projections and other forward-looking statements included in this presentation have been prepared based on assumptions, which we believe to be reasonable, but not in accordance with U.S. Generally Accepted Accounting Principals ("GAAP") or any guidelines of the SEC. Actual results may vary, perhaps materially. You are strongly cautioned not to place undue reliance on such projections and other forward-looking statements. All subsequent written and oral forward-looking statements activibuted us or to persons acting on our behalf are expressly qualified in their entirety by these cautionary statements. Except as required by federal securities laws, we disclaim any intention or obligation to update or revise a

Accounting Adjustments Related to the Consolidation of the Operations of the PCs and Filing of Form 12b-25

In those states which require a licensed Doctor of Chiropractic to own the entity that offers chiropractic services, the Company enters into a management agreement with a professional corporation (PC) licensed in that state to provide chiropractic services. To increase transparency into operating results and to align with accounting rules, the Company will now consolidate the full operations of the PC. This will result in increases to our revenue and G&A expenses by an identical amount and would have no impact on our bottom line except in instances when the PC has sold treatment packages and wellness plans. Revenue from these packages and plans will now be deferred and will be recognized when patients use their visits. The Company has previously consolidated its clinic operations in Non-PC states such as Arizona and New Mexico, and the deferred revenue around packages and plans in those states was already reflected in its financial statements. Therefore, these adjustments are isolated to the managed clinics in PC states. These adjustments will have no impact on cash flow. Based on our analysis, the recording of all accumulated deferred revenue in one adjustment would represent a material change to the current period financial statements. As such, the Company will revise the historical financial statements so the reader has an understanding that the comparative periods as reflected in the financial statements and in the below commentary reflect adjusted figures.

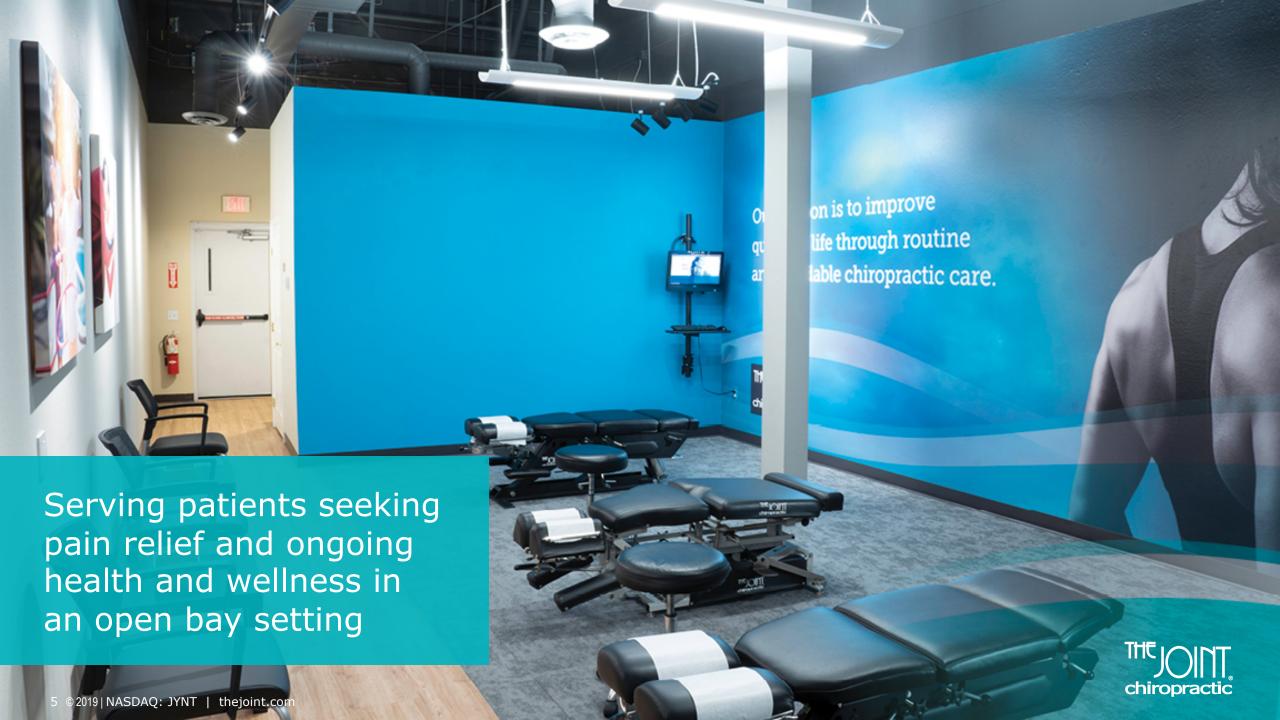
Business Structure

The Joint Corp. is a franchisor of clinics and an operator of clinics in certain states. In Arkansas, California, Colorado, District of Columbia, Florida, Illinois, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Minnesota, New Jersey, New York, North Carolina, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Washington, West Virginia and Wyoming, The Joint Corp. and its franchisees provide management services to affiliated professional chiropractic practices.









Continued Strong Improvements Second Quarter of Positive Net Income

	Q1 2019 vs Q1 2018
System-wide gross sales	32%
System-wide comp sales >13 months ¹	25%
System-wide comp sales >48 months ¹	18%
Revenue	24%
Net Income	\$1.0M, <i>up \$1.0M</i>
Adjusted EBITDA ²	\$1.5M, <i>up \$1.0M</i>
Unrestricted cash \$8.1M at Mar. 3	1. 2019.

Unrestricted cash \$8.1M at Mar. 31, 2019, compared to \$8.7M at Dec. 31, 2018

SYSTEM-WIDE GROSS SALES

(\$ in M)



¹ Financial statements for comparative periods have been adjusted to reflect the consolidation of company managed clinics owned by professional corporations. ² Comparable Sales include only the sales from clinics that have been open at least 13 or 48 full months and exclude any clinics that have closed.

³ Reconciliation of Adjusted EBITDA to GAAP earnings is included in the Appendix.

The Joint's Strong Operational Metrics

The Joint Corp. 8-yr. CAGR 83%¹ vs. industry CAGR 1.2%^{2*}

1.8M
patients treated
through
Dec. 31, 2018

patient visits in 2018

26% of patients were new to chiropractic³

790/0
of system-wide gross sales from monthly memberships in 2018

30%
annual systemwide gross sales increase 2018 vs 2017

Chiropractic Market

Large and highly fragmented

- \$90B spent on back pain each year¹
- \$15B growing chiropractic market²
- 62M Americans saw a chiropractor in last 5 yrs., 35.5M in last 12 mos.³
- ~80% of those surveyed want a non-pharmacologic approach to physical pain³
- 55% reduction in the likelihood of people filling prescriptions for opioids in those who received chiropractic care⁵

¹ Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, 2016-17 Edition | ² IBIS World Chiropractors Market Research Report; February 2019 | ³ Gallup-Palmer College of Chiropractic Report 2016 | ⁴ Noninvasive Treatments for Acute, Subacute, and Chronic Low Back Pain. Ann Intern Med. [Epub ahead of print 14 February 2017] doi: 10.7326/P17-9032 | ⁵ Association between Utilization of Chiropractic Services and Use of Prescription Opioids Among Patients with Low Back Pain

The American College of Physicians
(ACP) now recommends for patients with chronic low back pain, non-drug therapy such as spinal manipulation as a first line of treatment. The ACP states that treatments such as spinal manipulation are shown to improve symptoms with little risk of harm⁴.

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First Mover Advantage in a **Highly Fragmented Market**

as of 3/31/19	CLINICS	STATES	FRANCHISE	OWNED/ MANAGED	INSURANCE	PRIVATE PAY
The Joint Corp.	454	33	✓	V		V
HealthSource Chiropractic	236	34	✓		V	
ChiroOne	50	2		√	V	
AlignLife Chiropractic	20	7	V		V	
ChiroWay	8	1	V			V
Simply Chiropractic	8	5	√			V
Express Chiropractic	5	1	V			V
NuSpine	2	1	✓			V
Independent Offices	39,000¹	50		V	Varies	Varies



Revolutionizing Access to Chiropractic Care

FEATURES	INDUSTRY PROBLEMS	THE JOINT'S SOLUTIONS
Affordability (per appointment)	\$77 Average ¹	\$27 Average
Convenient Locations	Medical Centers / Offices	Retail Locations
Multiple Locations	Limited Locations	454 Clinics
Walk-in / No Appointment	Appointments Required	No Appointments
Insurance / Caps / Co-pays	Yes	Private Pay
Inviting Consumer-centric Design	Clinical	Approachable, Consumer Friendly
Service Hours	Limited / Inconsistent	Open 6-7 Days + Nights & Weekends ²
Average Patient Visits per Clinic	600 per Month ³	1,000+ per Month ⁴



Proven Model Builds Brand & Accelerates Scale

Successful franchisors with hybrid company-owned/managed and franchised strategy:























Both models contribute fundamental components to long-term strategic growth:

COMPANY-OWNED/MANAGED CLINICS

FRANCHISED CLINICS

Focused expansion in strategic markets

- Capital light accelerates brand development & growth
- Strong unit economics, high cash flow and profits
- Predictable, growing revenue from royalties and fees

Profits generate additional capital funding

Capital funding from franchise license sales



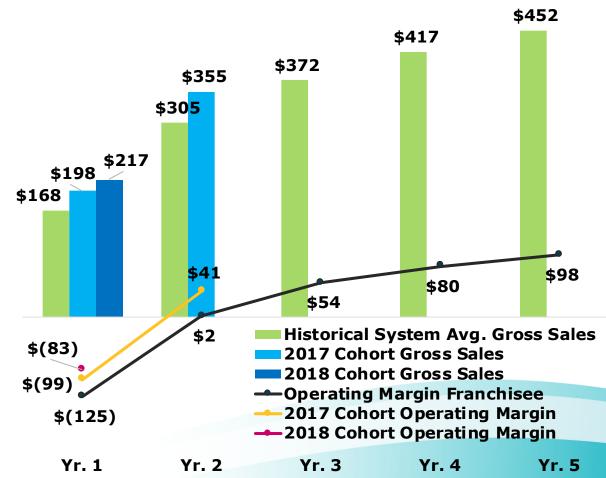
Unit Economics

- Approximate investment of \$276K
 - \$150K initial build-out cost
- Franchisee pays 7% royalty on gross sales
- Franchisee pays \$450/month in software fees
- Assumes breakeven at \$25K monthly gross sales
- Franchisee pays \$39.9K per license, prior to year 1 sales
- Improving estimated cash-on-cash return from 5+years to approximately 3.5 years

¹ Based on average historical gross sales growth rates from January 2013 through March 2019. | ² Breakeven varies on a clinic by clinic basis based on actual gross sales and operating expenses. This represents operating margin excluding income taxes and depreciation.

SYSTEM AND COHORT SALES AND POTENTIAL FRANCHISEE UNIT CONTRIBUTION

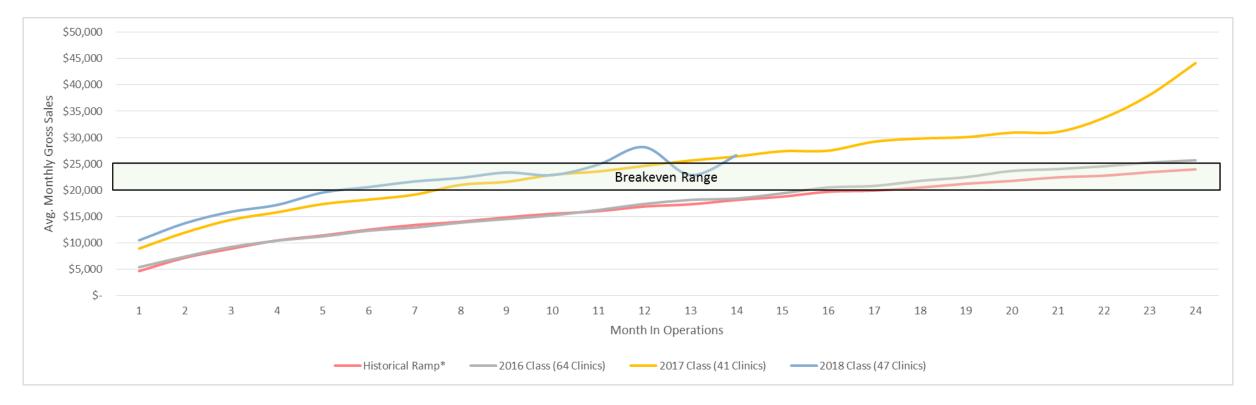
(5 yr. avg., \$ in 000s)





Reducing Clinic Time to Breakeven

- Clinics opened in 2019 at least as strong as 2018
- Reduced average time to estimated breakeven: 2018 clinics ~ 6 months; 2017 ~ 9 months in 2017;
 18 to 24 months historically



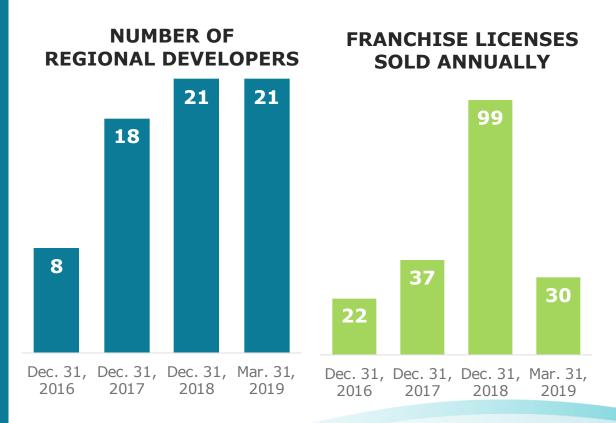
^{*} Based on average historical gross sales growth rates from January 2013 through March 2019.

RD Model Proven to Accelerate Scale

1000 units tipping point for national recognition and economies of scale

- Regional Developers (RD) model successful for many small-box retail franchises
- RDs pay for territory and manage franchises for revenue split
 - RD license fee varies by area
 - Receives 3% of the 7% royalty on gross sales of RD managed franchises

Percent of Licenses Sold by RDs 100% of in Q1 2019, vs. 89% in 2018 and 49% in 2017





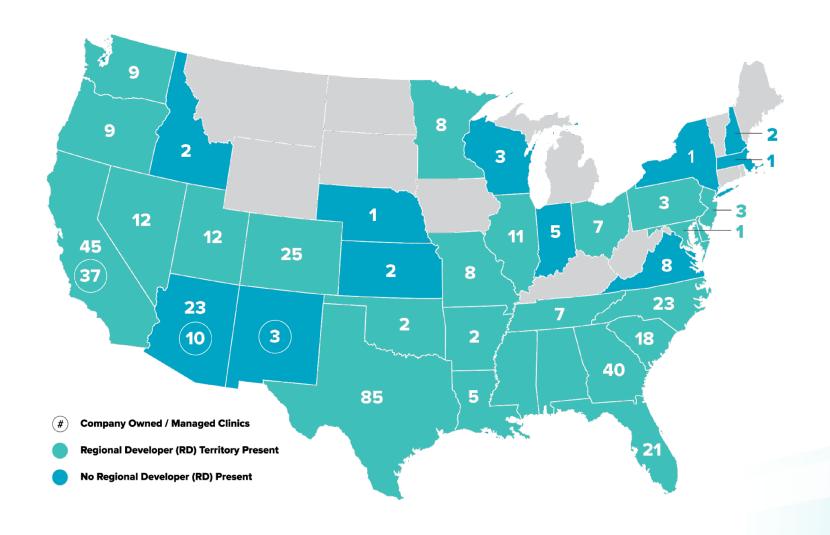
Patient Demographic Extremely broad patient base, all walks of life

- 25 to 55, Market Penetration Index (MPI) of 117 174
- 50% male / 50% female
- 60% white collar / 40% blue collar
- \$50K \$100K household income, MPI 146
- Over-index Hispanic and Asian, MPI 162 and 126
- Over-index Bachelor's degree or higher, MPI 119
- Over-index aerobic exercise, MPI 128



The Market Penetration Index (MPI) is a ratio that compares the percent of households in the patient file who possess a specific attribute to the percent of households in the reference population who exhibit that same attribute. An index of 100 means that the attribute is found as often within the customer file as it is within the reference population. For example, an MPI of 119 would mean that a specific attribute (in this case "Bachelors degree or higher") showed up 19% more often in our database than it does in the population in which our clinics exist.

Advancing Robust National Footprint

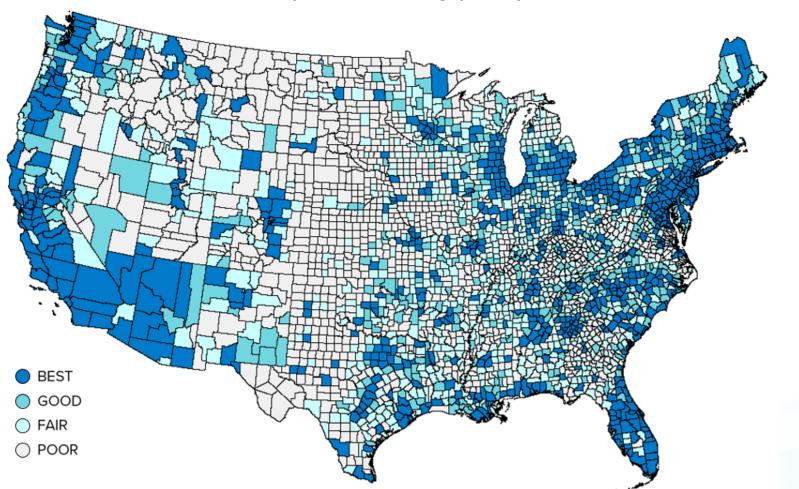


454 33
Clinics States

Data Analytics Yields 1700+ Clinics

Projected Core Customer & Trade Area Potential

(based on current usage patterns)



550+k patient records

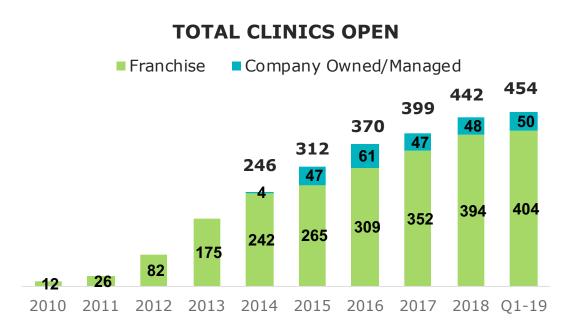
- Analyze demographics and psychographics
- Model attributes
- Roll across country

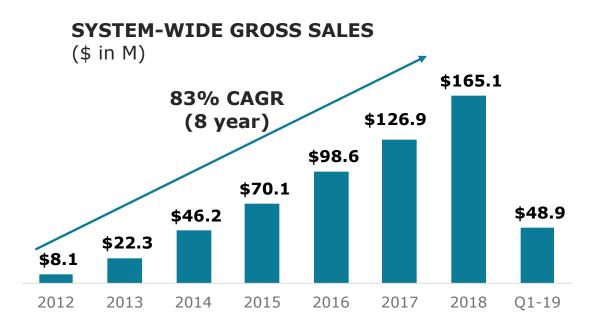
1700+ similar points of distribution



Fueling Momentum, 14 Total Clinic Openings

- 454 clinics at Mar. 31, 2019, up from 442 at Dec. 31, 2018
 - 404 franchises including 12 openings less 1 corporate buyback and 1 closure in Q1 2019
 - 50 corporate-owned/managed clinics, including 2 greenfields and 1 corporate buyback less 1 consolidation in Q1 2019
- Continue to experience unusually low closure clinic rates of less than 1%





Q1 2019 Strong Sales Performance



- **System-wide gross sales up 32%** to \$49.8, from \$37.0M in Q1 2018
- **System-wide comp sales**¹ for clinics >13 months in operation increased 25%
- System-wide comp sales¹ for clinics >48 months in operation increased 18%



Reiterating 2019 Guidance

\$ in M	2018 ACTUAL ¹	LOW	HIGH
Revenues	\$36.7	26%	32%
Adjusted EBITDA ²	\$2.9	67%	100%
New Franchise Openings	47	70	80
Additional Company-owned/Managed Clinics ³	1	8	12



¹Financial statements for comparative periods have been adjusted to reflect the consolidation of company managed clinics owned by professional corporations. ²Reconciliation of Adjusted EBITDA to GAAP earnings is included in the appendix. | ³Through a combination of both greenfields and buybacks.

2019 Growth Strategy

Building nationwide brand to deliver shareholder value

- Continue to focus on franchise sales
- Further leverage RD strategy
- Accelerate the expansion of corporate clinic portfolio within clustered locations
 - Build greenfield clinics in clustered locations
 - Acquire franchised clinics opportunistically

Continue Momentum

Franchise Licenses Sold





 Acquired Franchise Clinics

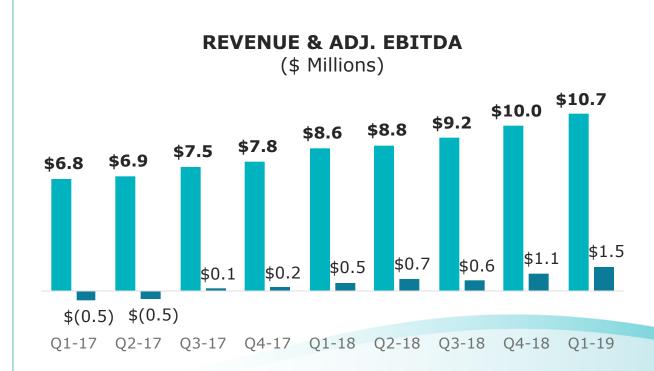


APPENDIX



Delivering Results: Quarterly Highlights

SYSTEM-WIDE COMP SALES % GROWTH 26% 26% 25% 24% 25% 19% 17% 17% 20-17 Q2-17 Q3-17 Q4-17 Q1-18 Q2-18 Q3-18 Q4-18 Q1-19







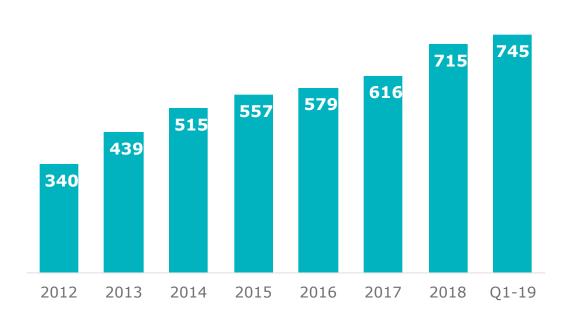
Q1 2019 Financial Summary

\$ in M¹	Q1 2019	Q1 2018	IMPROVEMENT	
Revenue	\$10.7	\$8.6	\$2.0	24%
Corporate clinics	5.6	4.8	0.8	17%
Franchise fees	5.1	3.8	1.2	31%
Cost of revenue	1.2	1.0	(0.2)	(24%)
Sales and marketing	1.5	1.1	0.4	(37%)
Depreciation	0.4	0.4	0.0	
G&A	6.6	6.3	(0.3)	(5%)
Net Income / (Loss)	1.0	(0.0)	1.0	
Adj. EBITDA ²	1.5	0.5	1.0	190%

¹ Financial statements for comparative periods have been adjusted to reflect the consolidation of company managed clinics owned by professional corporations. Due to rounding may numbers many not sum. ² Reconciliation of Adjusted EBITDA to GAAP earnings is included in the Appendix.

Driving Top-line Growth

GROSS CUMULATIVE FRANCHISE LICENSES SOLD¹



REVENUE² (\$ in M)





Management Leverages Extensive Experience

















Jake Singleton CFO









VP, Operations







Jason Greenwood VP, Marketing





YOUNG & **RUBICAM** GROUP



Amy Karroum VP, Human Resources











Eric Simon VP, Franchise Sales

























Manjula Sriram









Dr. Steve Knauf, DC

Director of Chiropractic

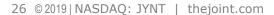
& Compliance











Experienced Board Offers Leadership





- · Director, Hudson's Bay Company & HSNi
- Varsity Brands
- Collective Brands
- Payless
- Cole Haan
- J. Crew Group
- Roark Capital Group, TPG Capital &Growth
- Pres. Appointee, House Advisory Council on Trade Policy Negotiation



James H. Amos. Jr. Director, 2015

- Pres. & CEO, NCPA
- · Chair, APFI, P &G franchising initiatives
- Mail Boxes Etc. now The UPS Store
- Chair, International Franchise Association (IFA)
- Marine Corps Captain



Ronald V. DaVella, CPA Director, 2014

- Amazing Lash Studio franchisee
- CFO, Amazing Lash Studio Franchise
- · Deloitte & Touche, rising to Audit Partner



Suzanne M. Decker Director, 2017

- · Chief HR Officer, Aspen Dental Mamt
- Davis Vision Companies



Peter D. Holt Director, 2016

- Pres. & CEO, The Joint Corp.
- Tasti D-Lite
- Great Hills Partners
- Mail Boxes, Etc. now **UPS Store**
- Director International Franchise Association (IFA)
- Chair, International Affairs Network (IAN)



Abe Hong Director, 2018

- EVP, CIO, Discount Tire Corporation
- EVP, CIO Red Rock Resorts (NASDAQ:RRR)
- International IT, Starbucks (NASDAQ:SBUX)



Richard A. Kerley Director, 2015

- Chair, The Providence Service Corporation (NASDAQ: PRSC)
- Peter Piper, a privately-held pizza & entertainment restaurant chain
- Fender Musical
- Deloitte & Touche

BS, Ohio University MBA, University of Miami AB, University of Missouri-Columbia

BS, Queens College MBA, Pace University

BS, Russell Sage College

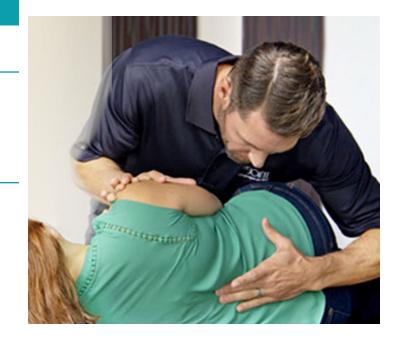
BA, Univ. of Washington MA, University of London

BE, U.S. Military Academy at West Point

BA, Marshall University

Transformative Opportunity for Chiropractors

	INDUSTRY	THE JOINT
Starting Salary	\$30K - \$40K ¹	\$65K - \$75K plus bonus potential ²
Accessibility	Appointments requiredMedical centers & officesTraditional office hours	 No appointments Clustered, high-visibility retail locations Open evenings + weekends³
Practice & Insurance	 Challenges of managing a business without support Difficulty attracting new patients Insurance hassles Slow payment cycle 	 Proprietary CRM and POSsoftware Ongoing training and coaching Ability to perfect technique Less administration Higher patient focus Better cash flow





¹ Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, 2016-17 Edition

² Based on Joint Corp. Company-owned/managed actual salaries | ³ Hours vary by clinic

Non-GAAP Measure Definition

This presentation includes a presentation of EBITDA and Adjusted EBITDA, which are non-GAAP financial measures. EBITDA and Adjusted EBITDA are presented because they are important measures used by management to assess financial performance, as management believes they provide a more transparent view of the Company's underlying operating performance and operating trends. Reconciliations of net loss to EBITDA and Adjusted EBITDA are presented where applicable. The Company defines EBITDA as net income (loss) before net interest, taxes, depreciation and amortization expenses. The Company defines Adjusted EBITDA as EBITDA before acquisition-related expenses, bargain purchase gain, loss on disposition or impairment, and stock-based compensation expenses.

EBITDA and Adjusted EBITDA do not represent and should not be considered alternatives to net income or cash flows from operations, as determined by accounting principles generally accepted in the United States, or GAAP. While EBITDA and Adjusted EBITDA are frequently used as measures of financial performance and the ability to meet debt service requirements, they are not necessarily comparable to other similarly titled captions of other companies due to potential inconsistencies in the methods of calculation. EBITDA and Adjusted EBITDA should be reviewed in conjunction with the Company's financial statements filed with the SEC.



Q1 2019 Segment Results



-	-	inics	Оре	erations	Coi	rporate	solidated
Total Revenues	\$	5,639	\$	5,040	\$	0	\$ 10,679
Total Operating Costs		(4,694)		(2,651)		(2,286)	(9,631)
Operating Income (Loss)		945		2,389		(2,286)	1,049
Other Income (Expense), net		(83)		7		(21)	(98)
Loss Before Income Tax Expense		862		2,396		(2,307)	951
Total Income Taxes		_		-		(1)	(1)
Net Income (Loss)		862		2,396		(2,306)	953
Net Interest		(3)		(7)		21	12
Income Taxes		-		-		(1)	(1)
Total Depreciation and Amortization Expense		313		0		53	366
EBITDA _		1,172		2,390		(2,233)	1,329
Stock Based Compensation Exp		-		-		172	172
Bargain Purchase Gain		(19)		-		-	(19)
Loss on Disposition/Impairment		-		-		-	-
Acquisition Expenses		(0)				_	(0)
Adjusted EBITDA		1,153		2,390		(2,061)	1,481

Corporate



The Joint

Unallocated

Franchise

2018 Financial Summary

\$ in M *	2018	2017	IMPROVEMENT	
Revenue	\$36.7	\$29.1	\$7.6	26%
Corporate clinics	19.6	15.3	4.3	28%
Franchise fees	17.1	13.8	3.3	24%
Cost of revenue	4.3	3.2	1.1	(34%)
Gross profit	32.4	25.9	6.5	25%
Operating expenses	32.2	29.6	(2.6)	(9%)
Net Income / (Loss)	0.1	(3.8)	4.0	
Adj. EBITDA¹	2.9	(0.7)	3.6	

- \$8.7M unrestricted cash at Dec. 31, 2018, compared to \$4.2M at Dec. 31, 2017
- \$23.1M of federal net operating losses (NOLs) at Dec. 31, 2018, available to offset future taxable income

^{*} Due to rounding may numbers many not sum. 1 Reconciliation of Adjusted EBITDA to GAAP earnings is included in the Appendix. Financial statements for comparative periods have been adjusted to reflect the consolidation of company managed clinics owned by professional corporations.

2018 Segment Results & GAAP Reconciliation



	Corporate Clinics		anchise erations	 llocated rporate	he Joint Isolidated
Total Revenues Total Operating Costs Operating Income (Loss)	\$ 19,545 (18,070) 1,476	\$	17,115 (9,032) 8,083	\$ (9,416) (9,415)	\$ 36,662 (36,518) 144
Other Income (Expense), net Loss Before Income Tax Expense	6 1,482		43 8,126	(84) (9,499)	(35) 109
Total Income Taxes Net Income (Loss) Net Interest	- 1,482 6		8,126 (43)	(38) (9,461) 84	(38) 147 47
Income Taxes Total Depreciation and Amortization Expense	- 1,105		1	(38) 450	(38) 1,556
EBITDA Stock Based Compensation Exp Bargain Purchase Gain	2,593 - (13)		8,084 - -	(8,965) 628	1,712 628 (13)
Loss on Disposition/Impairment Acquisition Expenses	251 -		-	343	594 4
Adjusted EBITDA	2,831		8,084	 (7,989)	2,925

Financial statements for comparative periods have been adjusted to reflect the consolidation of company managed clinics owned by professional corporations.



GAAP – Non-GAAP Reconciliation¹

	01 17	00.47		2 4 7	_	\4 4 - 1	_	-1/47	_	1 10	~	2 40	_	2.46	_	4.40		110	01	10
	Q1-17	Q2-17	•	3-17	ζ	Q4-17		FY17	Q	21-18	_	2-18	Q	23-18	Q	24-18		Y18	-	L-19
Total Revenue	6,786	6,948		7,512		7,831		29,077		8,647		8,805		9,242		9,968		6,662		0,679
Total Cost of Revenue	694	766		839		925		3,224		972		1,052		1,085		1,202		4,310		1,206
Gross Profit	\$ 6,093	\$ 6,182	\$ (6,672	\$	6,906	\$.	25,853	\$	7,675	\$	7,753	\$	8,157	\$	8,767	\$32	2,351	\$ 5	9,473
Sales & Marketing	959	1,058		1,173		1,284		4,474		1,102		1,294		1,195		1,229	4	4,820		1,506
Depreciation/Amortization Expense	578	503		469		467		2,017		387		405		389		375	7	1,556		366
Other Operating Expenses	6,199	5,707		5,593		5,582		23,081		6,269		6,118		6,820		6,625	25	5,832	· ·	6,553
Total Other Income (Expense)	(19)	(24)		10		(31)		(64)		(11)		19		(11)		(31)		(35)		(98)
Total Income Taxes	41	3		36		(43)		36		(63)		6		(50)		70		(38)		(1)
Net Income (Loss)	\$ (1,703)	\$ (1,113)	\$	(588)	\$	(415)	\$	(3,820)	\$	(32)	\$	(51)	\$	(208)	\$	437	\$	147	\$	953
Net Interest	24	24		20		11		79		11		11		11		14		47		12
Income Taxes	41	3		36		(43)		36		(63)		6		(50)		70		(38)		(1)
Depreciation and Amortization Expense	578	503		469		467		2,017		387		405		389		375	7	1,556		366
EBITDA	\$ (1,061)	\$ (583)	\$	(63)	\$	20	\$	(1,687)	\$	303	\$	371	\$	142	\$	895	\$ 1	L,712	\$ 1	L,329
Stock Based Compensation	95	132		185		182		594		208		139		123		159		628		172
Bargain Purchase Gain	-	-		-		-		-		-		(30)		-		17		(13)		(19)
Loss on Disposition/Impairment	418	-		-		-		418		-		251		343		-		594		-
Acquisition Expenses	13	0				-		13		-		3		1		-		4		(0)
Adjusted EBITDA	\$ (535)	\$ (451)	\$	122	\$	202	\$	(662)	\$	511	\$	734	\$	609	\$	1,072	\$ 2	2,925	\$ 1	L,481



¹ Financial statements for comparative periods have been adjusted to reflect the consolidation of company managed clinics owned by professional corporations.

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