FORM 3

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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## **INITIAL STATEMENT OF 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*     Bowman Scott Justin	2. Date of Event Requiring Statement (Month/Day/Year) 06/10/2025	3. Issuer Name and Ticker or Trading Symbol JOINT Corp [ JYNT ]				
(Last) (First) (Middle)		Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)	
16767 NORTH PERIMETER DRIVE SUITE 110		Director 10% Owner  X Officer (give title Other (specify below) below)  Chief Financial Officer		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person		
(Street) SCOTTSDALE AZ 85260			Chief I manera	. One	Form filed by More than One Reporting Person	
(City) (State) (Zip)						

#### Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	` '	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	l '
No securities are beneficially owned.	0	D	

# Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion Form: Direct (D) or	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)	

**Explanation of Responses:** 

## Remarks:

Exhibit List - 24 Limited Power of Attorney

/s/Scott Bowman 06/12/2025

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

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