

Forward-Looking Statements

This presentation contains "forward-looking statements," pursuant to the safe harbor provisions of the Private Securities Litigation Reform Act of 1995, about ADMA Biologics, Inc. and its subsidiaries (collectively, "we," "our" or the "Company"), including, without limitation, statements that may predict, forecast, indicate, or imply future results, performance or achievements, and may contain the words "estimate," "project," "potential," "possible," "forecast," "intend," "target," "anticipate," "plan," "expect," "believe," "will," "is likely," "will likely," "should," "could," "would," "may" or, in each case, their negative, or words or expressions of similar meaning. These forward-looking statements also include, without limitation, our plans to develop, manufacture, market, launch and expand our own commercial infrastructure and commercialize our current products and future products; our plans to expand our pipeline with differentiated immune globulin product candidates in development; potential near and mid-term value creation through certain milestones; the possibility of expanding our product portfolio with additional specialty immune globulin products; product expansions into new fields of use, indications, target populations and product candidates, and the labeling or nature of any such approvals; our dependence upon our third-party and related party customers and vendors and their compliance with regulatory bodies; our ability to obtain adequate quantities of U.S. Food and Drug Administration ("FDA")-approved plasma with proper specifications; the likelihood and timing of FDA action with respect to any further filings by the Company; the expected financial, strategic and commercial benefits of our FDA- approved SA25 Workcell aseptic fill finish machine; results of clinical development; the potential of specialty plasma-derived biologics to provide meaningful clinical improvement for patients living with Primary Immune Deficiency Disease ("PI"); expected market size growth in the U.S. immune globulin market; our ability to market and promote our products in the competitive environment and to generate meaningful revenues; our estimated revenue potential and related timing; certain revenue opportunities; future financial guidance; our estimated revenue growth relative to our competitors; our production capacity and yield and ability to increase such capacity and yield; our ability to increase market share and grow revenue through anticipated product launches as well as expected peak market share; estimated global supply and demand for plasma; the estimated value of our Boca Raton manufacturing facility; potential clinical trial initiations; potential investigational new product applications, Biologics License Applications, and expansion plans; our intellectual property position, including our expectations of the scope of patent protection with respect to our products or other future pipeline product candidates; the achievement of clinical and regulatory milestones; our manufacturing capabilities; third-party contractor capabilities and strategy; our plans relating to manufacturing, supply and other collaborative agreements; potential contract manufacturing opportunities and sales of our immune globulin products; our estimates regarding expenses, capital requirements and needs for additional financing; possible or likely reimbursement levels for our currently marketed products and estimates regarding market size; projected growth and sales for our existing products as well as our expectations of market acceptance of BIVIGAM® and ASCENIV™; future economic conditions and performance; commercialization efforts relating to our products and the runway and limitation of our available cash; and our ability to identify alternative sources of cash. The forward-looking statements contained herein represent the Company's estimates and assumptions only as of the date of this presentation, and the Company undertakes no duty or obligation to update or revise publicly any forward-looking statements contained in this presentation, except as otherwise required by the federal securities laws. Forward-looking statements are subject to many risks, uncertainties and other factors that could cause our actual results, and the timing of certain events, to differ materially from any future results expressed or implied by these forward-looking statements, including, but not limited to, the continued safety and efficacy of, and our ability to obtain and maintain regulatory approvals of, our current products as well as our plans to increase our supplies of plasma; regulatory processes and interpretations of final data of our products and product candidates; acceptability of any of our products for any purpose, by physicians, patients or payers; concurrence by the FDA with our conclusions and the satisfaction by us of its guidance relating to risks; and uncertainties described in our fillings with the U.S. Securities and Exchange Commission, including our most recent reports on Form 10-K. 10-O and 8-K. and any amendments thereto.

Who We Are: A Specialty Biologics Company



ADMA Biologics is an end-to-end biopharma company leading the way as a producer of specialty plasma-derived biologics

~665 Full Time Employees

Manufacturing Facility Boca Raton, FL

Corporate Headquarters Ramsev, NJ

ADMA BioCenters' Headquarters

Roswell, GA



Three FDA-approved products:

- ASCENIV™ (Immune Globulin Intravenous, Human-slra)
- **BIVIGAM®** (Immune Globulin Intravenous, Human)
- NABI-HB® (Hepatitis B Immune Globulin, Human)



Intellectual Property:

· Patents and proven immunotechnology that has forged a new path forward in improving the lives of the immune-compromised and other patients at risk for infection



Optimized manufacturing processes:

Robust, sustainable, and controlled manufacturing process for producing our commercially available plasma-derived products



Contract manufacturing:

· Full suite of CDMO and contract manufacturing organization (CMO) opportunities. Partner with us for your clinical-stage or commercial aseptic filling, packaging requirements, and our unique good manufacturing practice (GMP) testing



Plasma collection network:

10 state-of-the-art FDA-licensed facilities dedicated to the collection of human plasma equipped with experienced clinicians and credentialed staff for plasma collection and donor care

ADMA Investment Highlights



High Growth, Profitable Biopharma Company Driving Innovation in the Specialty Biologics Market

DIFFERENTIATION

VERTICAL INTEGRATION

ASSET DURABILITY

UPSIDE

STRONG BALANCE SHEET



Differentiated U.S. Specialty Biologics Opportunity in a Large and Growing End-Market



Vertically Integrated Supply Chain with Innovative Technology and Production Processes



Unique Scarcity Value and Asset Durability



Potential Upside Through
Pipeline Products and
Production Yield
Enhancements



Strong Balance Sheet and Top Tier Earnings Growth Outlook

DIFFERENTIATION - VERTICAL INTEGRATION - IP - ASSET DURABILITY/SCARCITY

PIPELINE - YIELD ENHANCEMENT - FORECASTED GROWTH



Differentiated Opportunity in a Large & Growing Market



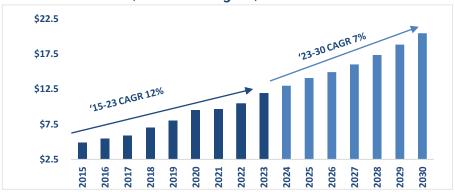
ADMA is 1 of 6 Manufacturers in a Growing, Supply-Constrained U.S. Immunoglobulin (IG) Market

- One of six manufacturers in a historically undersupplied U.S. IG market
- The only fully vertically integrated U.S.-domiciled fractionator
- Four major producers (Grifols, CSL Behring, Takeda and Octapharma)
 collectively account for >94% of U.S. IG market
- ADMA is the fastest growing provider of IG in the U.S. Market

Three FDA-Approved Products

- Comprehensive suite of three U.S. FDA-approved commercial IVIG products:
 - ✓ BIVIGAM is a polyclonal IVIG, offered in a range of vial sizes
 - ASCENIV is a unique polyclonal IVIG and the only product in its class produced by blending normal plasma with hyperimmune plasma using ADMA's patented methods
 - ✓ Nabi-HB protects against HBV infection among newly exposed individuals

U.S. IG Market: ~\$12Bn Growing to \$20Bn+











Vertically Integrated Supply Chain with Innovative Technology & Production Processes



End-to-End Control of Supply Chain

- End-to-end control of supply chain from plasma collection through plasma fractionation, purification, fill-finish and testing
- Among an elite group of U.S.-based biologic drug manufacturers with comprehensive in-house control of critical manufacturing and testing functions
- · Operating in cGMP compliance with validated methods
- Successful implementation of supply chain enhancements largely de-risks production scale-up and growth outlook
 - ✓ Raw Material Collections
 - ✓ Manufacturing
 - ✓ Filling & Packaging
 - ✓ Release & In-Process Testing

Plasma Supply Self-Sufficiency

- 10 FDA-licensed plasma collection facilities
- Contractually obligated third-party supply agreements expected to supplement the growing internal plasma collections
- Well-positioned infrastructure to support near term revenue growth and ensure continuity of product supply into the supply-constrained U.S. IG market



In-House Fill-Finish Functions

- FDA approved In-house aseptic fill-finishing capabilities
- Ongoing exploration of potentially accretive third-party fill-finish opportunities
- SA25 Workcell anticipated to meet all internal production needs with additional idle capacity, potentially adding new third-party revenues



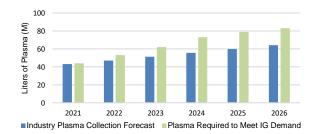


Unique Scarcity Value and Asset Durability



Complex Manufacturing Process Validated and U.S. FDA Approved

- Capital requirements, regulatory approvals and manufacturing lead time prohibit manufacturers from quickly increasing output and filling demand in endmarket supply
- Unique and complex manufacturing process with a long production cycle (7-12 months)
- Market demand forecasted to outpace industry supply for the foreseeable future



Adhere to Strict Regulatory Requirements With Data, Compliant SOPs and Processes In-Place

- Strict regulatory requirements for plasma-derived therapeutics governed by the FDA and state health departments
- Validation, product registration and ultimate commercialization takes ~3 to 5+ years – all current and complete
- ADMA operates in cGMP compliance across its manufacturing footprint as per recent FDA inspections and approvals



- ADMA acquires the Boca Raton facility and all rights to BIVIGAM
- ADMA works diligently to bring manufacturing facility into FDA compliance
- ADMA successfully obtains FDA approval for the optimized manufacturing process for BIVIGAM
- FDA Biologics inspection completed; achieved VAI compliance status

Significant Scarcity Value for ADMA's Plant

 ADMA estimates, based upon publicly disclosed fractionator transactions, Boca Plant valuation estimated at \$400M+ and ~5 years to complete registrations, clinical trials and construction of a cGMP-compliant fractionation plant and fill-finish facility of equivalent capacity to ADMA's





Source: Wall Street research



Potential Upside Through Production Yield Enhancements and New Product Pipeline Program



Current Capacity Supports \$465M+ 2025 Revenue; Upside Potential from Production Yield Enhancements

- Current plant infrastructure supports well-defined pathway to \$465M+ revenues by 2025, and a potential \$1B+ revenue opportunity with continued production ramp-up and revenue mix shift
- Advancing initiative to capture additional IG production yields from same quantities of starting plasma
- Significant upside potential from production yield enhancement, if successful
- Expected to benefit from market share gains as well as end-market IG growth





Potential Hyperimmune Globulin Pipeline Expansion

- Issued IP for commercial product to screen hyperimmune donors, tailor compositions and form plasma pools. IP protection through 2035
- Attractive new product and label expansion opportunities for specialty IGs targeting patient populations with high unmet need. SG-001, our S. pneumonia hyperimmune globulin pipeline program, is covered by a patent estate extending into 2037
- Published data supports potential evaluation of ASCENIV in immunecompromised patients and other respiratory viral pathogens in primary and secondary immune-deficient populations

ADMA's Patented Immunotechnology



Screen and identify hightiter donors

Hyperimmune donors with high-titer antibodies to select pathogens are identified.



Proprietary testing

A proprietary microneutralization assay quantitatively measures titer levels of neutralizing respiratory syncytial virus (RSV) antibodies in hyperimmune plasma donor samples.



Tailored compositions

Tailored plasma pools are derived from a unique blend of normal source plasma and plasma obtained from the selected donors.



Strong Balance Sheet & Top Tier Earnings Growth Outlook





Upwardly Revised 2024 Guidance:

- > \$415M Total Revenue
- > \$160M Adj. EBITDA(1)
- > \$120M Net Income
 - → Less than 1X Net Leverage (2024)

Upwardly Revised 2025 Guidance:

- > \$465M Total Revenue
- > \$215M Adj. EBITDA(1)
- > \$165M Net Income

Revenue Growth Driving Top-Tier Earnings Outlook \$MM \$130 \$110 \$90 \$70 \$50 \$30 \$10

Q3 2023

Total Revenue

—Adjusted EBITDA(1)

Q4 2023

Q1 2024

Adjusted Net Income (2)

Gross Profit

Q2 2024

Q3 2024

(\$10)

(\$30)

⁽¹⁾ Adjusted EBITDA is a non-GAAP financial measure. For a reconciliation of Adjusted EBITDA to the most comparable GAAP measure, please see the Company's earnings releases and SEC filings

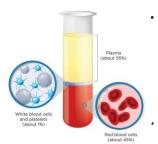
Adjusted Net Income is a non-GAAP financial measure. For a reconciliation of Adjusted Net Income to the most comparable GAAP measure, please see the Company's earnings releases and SEC filings



Introduction to Plasma-Derived Therapies and Immunoglobulins (IG)



Plasma Therapeutics



Plasma-derived therapeutics are essential, life-sustaining biologic drugs that replace absent proteins due to genetic and acquired disorders in hundreds of thousands of patients in the U.S.

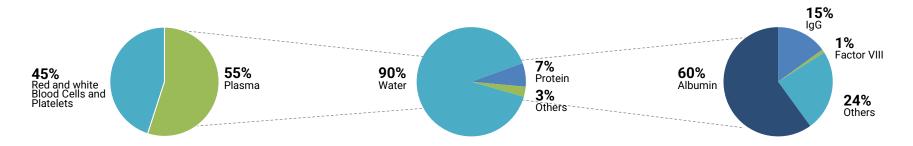
Many of these naturally occurring proteins are unable to be replaced by new, innovative therapies

Many patients require long-term treatments and some potentially for their entire life

Immunoglobulins (IG)



- Immunoglobulins (IG) or Intravenous Immune Globulins (IVIG) are pooled plasma-derived products from healthy plasma donors, containing a range of polyclonal antibodies against common pathogens (e.g., bacteria, fungi and viruses)
- Only 6 companies currently produce IVIG approved for the U.S. market, including CSL Behring, Grifols, Takeda, Octapharma, BPL and ADMA
- Other therapeutic products made from plasma proteins include: albumin, coagulation factors, alpha-1 and C-1 esterase, among others



ADMA's optimized IG manufacturing process supports the potential to maximize revenue from each liter of plasma while producing life-sustaining and saving therapies

IG Market Is Sizeable & Growing



Drivers of IG Market Growth

Aging Population

- Geriatric population more susceptible to rare diseases treatable by IG products
- Global population of 65+ expected to nearly double by 2050

Rise of Use of IGs in Medicine

- Surge in awareness related to treatment of rare diseases with IG products
- · Widening scope of indications treatable with IG products

Improved Diagnostics

- Improvements in diagnostics leading to increased rates of PI diagnoses
- Condition remains under-diagnosed; average PI diagnosis still takes 12.4 years

Increased Use of Immunosuppressive Therapeutics

 Increased utilization of immuno-oncology agents and other immunosuppressive therapeutics necessitating antibody supplementation

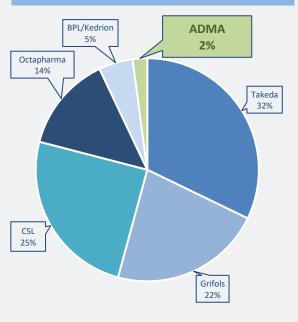
Increase in Number of Plasma Collection Centers

- · Growing number of plasma collection centers worldwide
- Increase in public and private associations that spread awareness and information related to plasma collection





Market Share of U.S. IG Producers (1)



Current ~\$12Bn U.S. IG market expected to grow to \$20Bn+ by 2030

Primary Immunodeficiency is a Significant Market Opportunity



Primary Immunodeficiency (PI) Overview (1)

- PI is a class of inherited genetic disorders that causes an individual to have a deficient or absent immune system due to either a lack of necessary antibodies or a failure of these antibodies to function properly
- Estimated prevalence of 1:1,200 in the U.S., or approximately 250,000 people
- NIH estimates 500,000 undiagnosed PI patients in the U.S.
- Over 400 genetic defects are responsible for PI
- Patients typically receive monthly outpatient infusions of IVIG therapy
- Without this exogenous antibody immune support, these patients would be susceptible to a wide variety of infectious diseases

Potential Higher-Risk Target Populations (1)

| Class | Est. Incidence (U.S.) | Est. Prevalence |
|---|-----------------------------|---|
| Common variable immune deficiency (CVID) | 1 in 25,000 to 1 in 50,000 | 2,000 to 5,000 patients |
| Severe combined immune deficiency (SCID) syndrome | ~100 new cases each year | 500-1,000 patients on IVIG post-transplant |
| Wiskott-Aldrich syndrome (WAS) | ~4 in every 1,000,000 males | 600 patients on IVIG therapy |
| DiGeorge syndrome (DGS) | 1 in 4,000 births | 1,000 patients on IVIG therapy |
| Ataxia telangiectasia (AT) | 1 in 40,000 to 1 in 100,000 | 3,000 to 8,000 patients |
| X-linked hyper IgM deficiency (XHMD) | 2 in every 1,000,000 males | 350 patients on IVIG therapy |
| X-linked agammagobulinanemia (XLA) | 1 in 10,000 | 3,500 patients more susceptible to viral infections |

Despite Decades of IG Use, Improved Therapies Still Needed

Despite standard IG therapy, patients continue to experience recurrent respiratory infection and chronic lung disease (2)(3)

In a 40 year study of 473 patients with PI on standard IVIG (3)







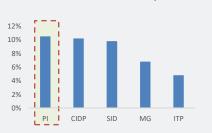
experienced recurrent respiratory tract infection (4)

developed chronic lung disease (5)

developed bronchiectasis (5)

~10% Volume Growth Projected for IG to Treat PI (6)

2015 - 2017 IG Volume Growth By Indication







PI is a prevalent and under-diagnosed disorder long-treated with IG therapy, but a continual need for improved options remains

6. Wall Street research

Centers for Disease Control, National Institute of Health

The broad spectrum of lung diseases in primary antibody deficiencies. Eur Respir Rev. 2018.

^{3.} Morbidity and mortality in common variable immune deficiency over 4 decades.

^{4.} The lung in primary immunodeficiencies: New concepts in infection and inflammation. Front Immunol. 2018.

^{5.} Subclinical infection and dosing in primary immunodeficiencies. Clin Exp Immunol. 2014.

ASCENIV™ Overview





ASCENIV: FDA-Approved Protection Against Serious Infections

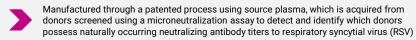


- Unique IVIG with differentiation based on patented methods for donor selection and pooling process blending normal source and hyperimmune RSV plasma
- Indicated for the treatment of patients with primary immunodeficiency (PI)
- ADMA received FDA approval in April 2019 and recorded first commercial sale in October 2019

Approved and introduced in April 2019 by ADMA

THE PRODUCTION OF ASCENIV

ONLY IVIG PRODUCT MANUFACTURED USING PATENTED DONOR SCREENING AND PLASMA POOLING METHODS (1)





Plasma collected from U.S. FDA-licensed plasma collection centers

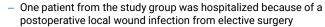
Meets potency requirements for 21CFR640

Proven Efficacy in Treating Patients with PI (2)

IN A 1-YEAR STUDY OF PATIENTS WITH PI, ASCENIV reported zero serious bacterial infections (SBIs)*

Patients and physicians can count on ASCENIV to reduce infectionrelated quality-of-life impact







- 24 out of 59 patients (41%) had a total of 54 unscheduled medical visits due to infections
- 1.7 missed days of work / school / activity PPPY due to infection
- 23 patients (39%) had a total of 93 missed days of work / school / activity due to infections out of a total of 21,535 patient days (<0.5%)



- 32.9 days of antibiotic use PPPY
 - 37 patients (63%) used antibiotics due to infection (includes therapeutic use)

Potential additional target populations across patients at risk for RSV infection, including in organ transplants and chemotherapy

2. ASCENIV Prescribing Information, ADMA Biologics, 2019

^{*} SBIs were defined as a rate of <1.0 cases of bacterial pneumonia, bacteremia/septicemia, osteomyelitis/septic arthritis, visceral abscess and bacterial meningitis per person-year PPPY = per patient per year.</p>

^{1.} ADMA Biologics patents issued 9,107,906 - 9,714,283 - 9,815,886

BIVIGAM® Overview





BIVIGAM: FDA-Approved Protection Against Serious Infections



- Plasma-derived IVIG that contains a broad range of antibodies similar to those found in normal human plasma
- Indicated for the treatment of patients with primary immunodeficiency (PI)
- ADMA received FDA approval for manufacturing BIVIGAM in May 2019 and recorded first commercial sale in August 2019

Approved and Reintroduced in May 2019 by ADMA

Proven Efficacy in Treating Patients with PI

IN A 1-YEAR STUDY OF PATIENTS WITH PI. BIVIGAM met all primary endpoints (1)(2)



Demonstrated protection from serious bacterial infections (SBIs)

- 0.037 rate of SBIs per vear*
- During the 12-month study period, 2 serious acute bacterial infections occurred in 2 patients with an onset date between the first infusion of BIVIGAM and the first follow-up visit
- 197 total infections in 58 patients were reported (3.7 infections PPPY)
- 86% of patients were administered antibiotics (39.1 days PPPY)

The Reintroduction of BIVIGAM RESULTS FROM ADMA'S STRONG EXECUTION AND REGULATORY EXPERTISE



Production of BIVIGAM is voluntarily suspended by previous owner due to manufacturing and compliance issues

Production

ADMA





FDA Compliance

ADMA works diligently

to optimize production

processes and bring

the facility into FDA

VAI status

compliance: achieved



ADMA obtains

manufacturing

BIVIGAM: first

FDA approval for

commercial sales

in August 2019

FDA Compliance







FDA Biologics achieved VAI status



Reduced health-related burdens

- Low rate of hospitalizations (0.21 days / PPPY)
- 2 patients (3.4%) hospitalized for a total of 11 days (0.06%)
- Fewer missed days of school / work (2.3 days / PPPY)
- 21 patients (36%) with total of 122 days (0.6%)

Ongoing reintroduction of BIVIGAM well-received in a high-demand IG market

^{*} Target was 1 SBI / year; 99% CI of 0.136 SBI / patient/year; of 63 adult patients in the enrolled in the study, 58 were included in efficiency analysis PPPY= per patient per year.

^{1.} BIVIGAM Prescribing Information. Boca Raton, FL: ADMA Biologics; 2019

^{2.} A new intravenous immunoglobulin (BIVIGAM) for primary humoral immunodeficiency. Expert Rev Clin Immunol. 2014.

Nabi-HB® Overview





Nabi-HB: FDA-Approved for Enhanced Immunity Against Hepatitis-B



- Successfully used for over 20 years to protect against hepatitis B infection among newly exposed individuals (post-exposure prophylaxis PEP)
- Manufactured from plasma obtained from vaccinated donors with high titers of antibodies to hepatitis B surface antigen, anti-HBs
- Received FDA approval in March 1999 under Nabi Biopharma; recorded first commercial sale under ADMA in April 2018

Approved in March 1999 (via Nabi); marketed by ADMA beginning in June 2017

THE THREAT OF HEPATITIS B

Poses An Immediate Threat to Sexual Assault Patients

- HBV is 50-100x more infectious than HIV (1)
- The risk of blood-borne infections being transmitted after a sexual assault is greater than with consensual sex (1)(2)
- Incidence of HBV exposure during sexual assault is unknown since the HBV status of perpetrators is rarely known (3)

Once someone is exposed to HBV, it may take hold and develop into potentially deadly chronic liver disease (4)

Seroprotection Remains a Serious Issue

- The HBV vaccine series alone takes up to 2 weeks to achieve initial serum levels and 3 doses (across 6 months) to provide seroprotection in ~90% of patients (1)(5)(6)
- Waning antibody levels may compromise seroprotection over time
- Among immunocompetent HBV vaccine responders, protection lasts 15 to 20 years (1)

~67% of U.S. adults 19-49 years old do not have adequate HBV vaccination coverage (1)

Proven Efficacy in Treating Hepatitis B

NABI-HB PROVIDES PROTECTION AGAINST HEPATITIS B INFECTION WITHIN 24 HOURS OF ADMINISTRATION (7)

Highly protective potency with Nabi-HB (7)

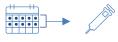


- Each milliliter of Nabi-HB contains >312 IU/mL of anti-HBs
- The potency of each milliliter of Nabi-HB exceeds the potency of anti-HBs in a U.S. reference hepatitis B immune globulin
- The U.S. reference has been tested against the WHO standard and found to be equal to 208 IU/mL

Delivers highly effective protection (7)

- Nabi-HB is 75% effective in preventing an HBV carrier state in those at risk following sexual exposure to persons with acute hepatitis B
- If administered as a single dose within 2 weeks of exposure





EFFICACY WHEN ADMINISATERED AS A SINGLE DOSE WITHIN 2 WEEKS OF EXPOSURE

CDC Recommendations for Prophylaxis: Administering an HBIG with the HBV vaccine series is highly effective in preventing transmission following exposure to HBV ⁽¹⁾

Anti-HBs = anti-hepatitis B surface antibodies; IU = international units; WHO = World Health Organization; HBIG = hepatitis immunoglobulin; HBV = hepatitis B virus; HIV=human immunodeficiency virus.

Established brand and distribution channels driving increased utilization in PEP and sexual assault patients

- Centers for Disease Control and Prevention.
- 2. Middlesex-London Health Unit. Post exposure management: hepatitis B, hepatitis C and HIV
- 3. Roberts and Hedges' Clinical Procedures in Emergency Medicine and Acute Care
- World Health Organization

- Do patients who received only two doses of hepatitis B vaccine need a booster? Cleve Clin J Med. 2014
 PDR: prescriber's digital reference. Engerix (hepatitis B vaccine recombinant) drug summary
- 7. Data on file. ADMA Biologics
- . Data off file. ADMA Diologics



ADMA's Patented Immunotechnology is Used to Manufacture ASCENIV™



Discover ADMA Biologics Patented Immunotechnology*

DESIGNED FOR THE IMMUNOCOMPROMISED

We manufacture, develop and commercialize specialized, targeted, plasma-derived therapeutics to extend and enhance the lives of individuals who are naturally or medically immunocompromised at risk for certain infections.



Screen and identify high-titer donors

Hyperimmune donors with high-titer antibodies to select pathogens are identified.



Tailored compositions

Tailored plasma pools are derived from a unique blend of normal source plasma and plasma obtained from the selected donors.



Proprietary testing

A proprietary microneutralization assay quantitatively measures titer levels of neutralizing RSV antibodies in plasma donor samples.

PATENTS ISSUED 9,107,906 - Composition 9,714,283 - Use 9,815,886 - Methods

Expiration 2035

*These patents include the use of IG for treatment and prevention of all viral induced respiratory infections

Commercialization/Distribution Strategy for ADMA's Immunoglobulins



Distribution channel is well-defined

- Inpatients hospital based
- Outpatients infusion center / physician office / homecare

Well established distribution organizations handle coldchain products efficiently

- Have existing product serialization tracking systems
- Have existing relationships with hospital pharmacy buyers and infusion center/homecare purchasing departments

ADMA's product portfolio offerings have overlapping prescriber call points

- Clinical immunologists
- · Infectious diseases
- Hematology/oncology
- · Critical care & emergency medicine













INFECTIOUS DISEASE



EMERGENCY MEDICINE



Identified and engaged with appropriate channel partners that align with our call plan and sites-of-service where there is demand across our immunoglobulin portfolio



ADMA Manufacturing One of Few Manufacturers of Specialty IGs in the U.S.



- World-class, cGMP-compliant plasma fractionation facility and laboratories in Boca Raton, FL; acquired in June 2017
- Last FDA compliance inspection completed in August 2021
- One of few FDA-approved fractionation facilities in the U.S.
- Annual capacity of up to 600,000 liters, or ~2.4M grams of finished IG, supporting a \$465M+
 revenue opportunity in 2025, and a potential \$1B+ revenue opportunity with continued
 production ramp-up and revenue mix shift
- Current Production yield of ~3.5-4 g / L and revenue / liter of \$600-\$800+
- Patented immunotechnology to screen hyperimmune donors, tailor plasma pool compositions and conduct proprietary antibody detection testing
- Capable of full product transfers as well as initial phase plasma product concept development
- In-house fill-finish capabilities following the FDA approval of the SA25 Workcell machine





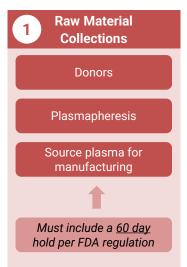


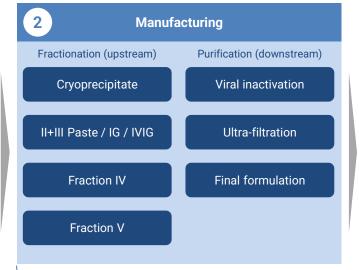
Fractionation plants are scarce with only a few companies operating FDA approved facilities in the U.S.

Production of Plasma-Derived Therapies

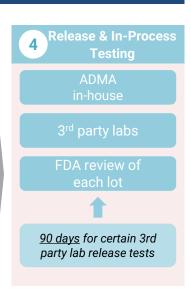


Cohn-Oncley Cold Ethanol Fractionation Process (Estimated 7-12 Months)









Approximately 4-6 months – includes all in-process bulk testing and batch record review and release by ADMA and any 3rd parties

End-to-end control of the supply chain and production processes to produce our products and leverage our expertise as a CMO for others

In-House Fill-Finish & Contract Manufacturing Opportunities



Fill-Finish, Packaging and Serialization

Fill-Finish Capabilities

- ✓ In-house fill-finish capabilities with the FDA approval of the SA25 Workcell
- ✓ In-house specialty team to oversee third-party operations
- ✓ Potential to improve final product yield and enhance margins, speed and time to release product to market

Product Labeling, Packaging and Serialization





SA25 Workcell Machine Brings Fill-Finish Capabilities In-House

SA25 Workcell aseptic fill-finish machine received FDA approval



Internal fill-finish production capabilities expected to result in:



Greater product supply consistency



Significantly improved gross margins



Significantly improved operational efficiencies



Reduced manufacturing cycle times

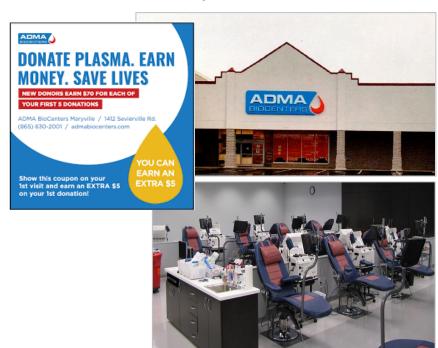


ADMA BioCenters Overview

10 FDA-Licensed Centers Supporting Plasma Self-Sufficiency



- Plasma collection centers are essential to ensure raw material supply to produce IG and other plasma proteins
- ADMA BioCenters consists of a network of 10 FDA-licensed plasma collection centers
- Growing internal plasma collections from ADMA's 10 centers supports plasma supply self-sufficiency, which is further supplemented by third-party supply agreements to ensure continuity of patient care
- ADMA BioCenters collects both hyperimmune and normal source plasma
- In addition to providing plasma supply for ADMA products, collected plasma is sold through supply contracts to leading plasma companies



Complete FDA licensure of all 10 centers supports plasma supply self-sufficiency







| NAME | SELECTED CURRE | NT OR PAST AFFILIAT | IONS | | |
|--|--------------------|--|-------------------------------|---|---|
| Adam Grossman Founder, President, CEO & Director | | ESIS aps | Bio-Pharmaceuticals, Inc. | America HOSPITAL SPECIALTIES Red Cro | Plasma Protein Therapeutics Association |
| Kaitlin Kestenberg COO & SVP Compliance | MERCK | ACØRDA° | | | |
| Brad Tade CFO & Treasurer | PHARMA SERVICES | Baxter | ⇔ BD | | |
| Steven Elms Chairman | AISLING Capital | HAMBRECHT & QUIST Investment Banking for the New Economy | LOXO | | |
| Dr. Jerrold Grossman Founder & Vice Chairman | GENESIS | Genesis Bio-Pharmaceuticals, Inc. | NATIONAL HOSPITAL SPECIALTIES | Immuno™ improving life through science | △ New York Blood Center |
| Lawrence Guiheen Director | Baxter | Plasma Protein Therapeutics Association | KEDRION BIOPHARMA | | |
| Young Kwon, Ph.D. Director | LIGHTSTONE | Momenta" Driven by impossible | Biogen. | ALCHEMAB THERAPEUTICS | |
| Alison Finger Director | bluebirdbio | ulli Bristol Myers Squibb" | Decibel THERAPEUTICS* | G Vbl | |

Financial Overview



| Current Financial Overview | Three Months Ended September 30, 2024 | Three Months Ended September 30, 2023 |
|--|--|--|
| Revenues | \$119.8M | \$67.3M |
| Gross Profit | \$59.7M | \$24.7M |
| Adjusted EBITDA ⁽¹⁾ | \$45.4M | \$12.7M |
| Net Income | \$35.9M | \$2.6M |
| Cash and cash equivalents | \$86.7M | \$74.2M |
| Total assets | \$390.6M | \$349.0M |
| Total liabilities | \$158.7M | \$197.6M |
| Total stockholders' equity | \$231.9M | \$151.4M |
| Weighted Avg. Diluted Common Shares Outstanding | 244.8M | 233.8M |

⁽¹⁾ Adjusted EBITDA is a non-GAAP financial measure. For a reconciliation of Adjusted EBITDA to the most comparable GAAP measure, please see the Company's earnings releases and SEC filings, as well as a reconciliation in the appendix

Upcoming Milestones





Execute on supply chain robustness and establish end-to-end control



Expand BioCenters Collection Network

Expand BioCenters plasma collection facility network to a total of 10 FDA-licensed centers

Enhance Biologics Production Yield

Enhance Biologics production yield, increasing peak production output and earnings potential

ASCENIV Label Expansion

Obtain FDA approval for ASCENIV's pediatric label expansion

Advance SG-001, S. pneumo Pre-Clinical Dev

Advance pre-clinical development of newly introduced S. *pneumo* hyperimmune globulin

Maximize Stockholder Value

Utilize strong balance sheet and forecasted cash flow to opportunistically maximize stockholder value

Drive Growth Outlook

Sustain industry-leading revenue and earnings growth outlook

Appendix - Non-GAAP Reconciliation



| | <u>3Q24</u> | <u>2Q24</u> | <u>1Q24</u> | <u>4Q23</u> | <u>3Q23</u> | 2Q23 | <u>1Q23</u> |
|--------------------------------|--|-------------|-------------|-------------|-------------|---------|-------------|
| | (in thousands, except share and per share amounts) | | | | | | |
| GAAP Net Income (Loss) | \$35.9 | \$32.1 | \$17.8 | (\$17.6) | \$2.6 | (\$6.4) | (\$6.8) |
| Loss on Extinguishment of Debt | | | | \$26.2 | | | |
| IT Systems Disruption | | | | | | \$2.8 | |
| Adjusted Net Income (Loss) | \$35.9 | \$32.1 | \$17.8 | \$8.5 | \$2.6 | (\$3.6) | (\$6.8) |
| Depreciation | \$1.9 | \$1.9 | \$1.9 | \$1.9 | \$1.9 | \$1.9 | \$1.9 |
| Amortization | \$0.0 | \$0.1 | \$0.2 | \$0.2 | \$0.2 | \$0.2 | \$0.2 |
| Income taxes | \$0.8 | \$3.8 | \$0.6 | \$0.0 | \$0.0 | \$0.0 | \$0.0 |
| Interest expense | \$3.5 | \$3.8 | \$3.8 | \$6.2 | \$6.4 | \$6.3 | \$6.1 |
| EBITDA | \$42.2 | \$41.7 | \$24.3 | (\$9.3) | \$11.1 | \$2.0 | \$1.4 |
| Stock-based compensation | \$3.2 | \$2.9 | \$2.1 | \$1.7 | \$1.7 | \$1.6 | \$1.1 |
| IT Systems Disruption | | | | | | \$2.8 | |
| Loss on Extinguishment of Debt | | | | \$26.2 | | | |
| Adjusted EBITDA | \$45.4 | \$44.5 | \$26.4 | \$18.6 | \$12.7 | \$6.4 | \$2.5 |