

Forward-looking Statements & Disclosures

This presentation contains forward-looking statements that are made pursuant to the safe harbor provisions of the federal securities laws, including statements regarding expected operational expenses, expected revenue of our commercial products, future operations, expected milestone payments from partners, commercial products and expected growth, clinical development, and other statements containing the words "anticipate," "believe," "estimate," "expect," "intend," "may," "plan," "predict," "project," "suggest," "target," "potential," "will," "would," "could," "should," "continue," and similar expressions. Any express or implied statements contained in this press release that are not statements of historical fact may be deemed to be forward-looking statements. Forward-looking statements involve risks and uncertainties that could cause Esperion's actual results to differ significantly from those projected, including, without limitation, the impact of the ongoing COVID-19 pandemic on our business, revenues, results of operations and financial condition, the net sales, profitability, and growth of Esperion's commercial products, clinical activities and results, supply chain, commercial development and launch plans, and the risks detailed in Esperion's filings with the Securities and Exchange Commission. Any forward-looking statements contained in this press release speak only as of the date hereof, and Esperion disclaims any obligation or undertaking to update or revise any forward-looking statements contained in this press release, other than to the extent required by law.

Q4 2022 & Recent Highlights



On average,

1 in 5 adults, or 22.5%

of US adults are estimated to have hypertension.
These are findings related to the new 2017
Hypertension Clinical Practice Guidelines.

of American adults, reported achieving adequate leisuretime aerobic and muscle-strengthening activities to meet the physical activity guidelines, based on 2016 data.



By 2035, more than 130 million adults, or 45.1% of the US population,

are projected to have some form of CVD. Total costs of CVD are expected to reach \$1.1 trillion in 2035, with direct medical costs projected to reach \$748.7 billion and indirect costs estimated to reach \$388 billion.



- Reported positive CLEAR Outcomes in December 2022, with ACC presentation March 4, 2023
- U.S net product revenue of NEXLETOL® and NEXLIZET® recognized growth of 23% Y/Y to \$15.0 million in Q4 2022
- Recent formulary additions at Point 32 Health, Summa Health Care and Connecticare across all Medicare, commercial, Medicaid and Health Exchange formularies, expand access and reimbursement to help more patients reach their LDL-c goal
- Established Scientific Advisory Board to support pipeline and life cycle management
- Appointed Ben Halladay as Chief Financial Officer
- Continued growth of our partner Daiichi Sankyo in their European territory
- Marketing applications submitted for NEXLETOL in Vietnam and Taiwan and NEXLIZET in Vietnam
- New partnership with RFK Racing to increase brand awareness and drive accelerated growth

Business Overview Sheldon Koenig, President and CEO

Three Step Plan to Build Shareholder Value

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Pursue label expansions to grow U.S. and international sales and secure receipt of milestone payments from partners

Achieve blockbuster status of bempedoic acid franchise and expand our innovative pipeline:

- ACLY
- Oral PCSKi

Appropriately build awareness of NEXLETOL® and NEXLIZET® and robust CLEAR Outcomes results amongst doctors and patients

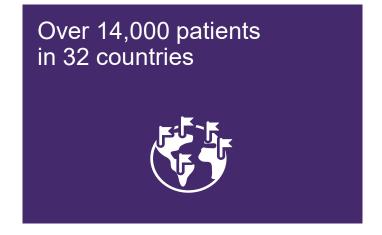
Landmark CLEAR Outcomes Study



Successfully achieved primary endpoint

First-of-its-kind, unprecedented CVOT in patients unable to maximize or tolerate a statin

Focused on significant, underserved population unable to maximize or tolerate statins





Primary Endpoint (MACE-4): Composite of the time to first cardiovascular death, nonfatal myocardial infarction, non-fatal stroke, or coronary revascularization

Hierarchy of Secondary Endpoints:

- MACE-3
- Fatal and non-fatal MI
- Coronary revascularization
- Fatal and non-fatal stroke
- Death from cardiovascular causes
- All-cause mortality

Commercial Activities Underway To Unlock Potential

Driving increased demand in advance of full-scale promotion



HCP Segmentation and Field Sales Force Sizing (Q1 2023)



Promotional Message and Positioning Refinement (Q2 2023)

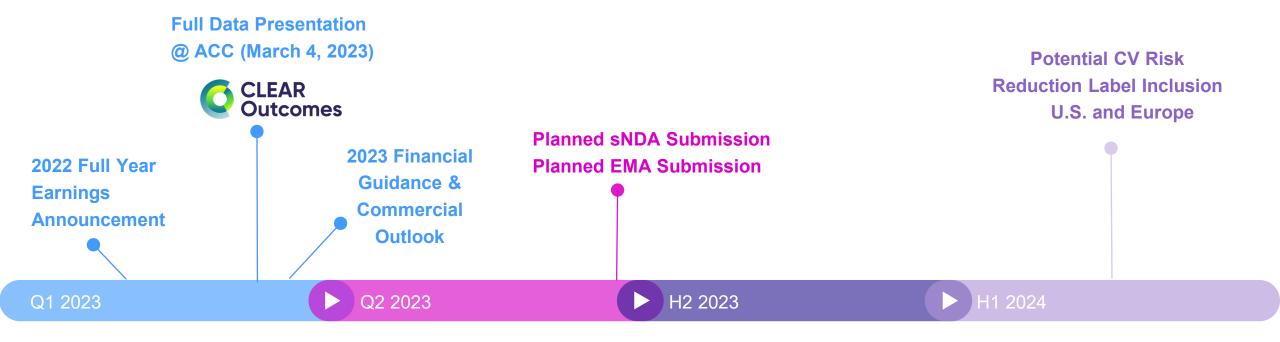


Prepare CLEAR Launch Campaign and Promotional Messaging (Q2-Q4 2023)



Field Sales Force Expansion (Q4 2023)

Timeline of Key Events



Enhanced Commercial Efforts in Preparation for CV Risk Reduction Label Inclusion

Payer Engagement Leveraging Results of CLEAR Outcomes

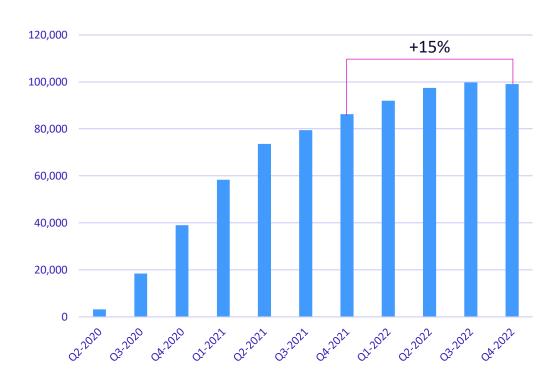
Scientific Exchange with Scientific Leaders, Medical Societies, Health Systems and Guidelines Committees

Financial Update Ben Halladay, Chief Financial Officer

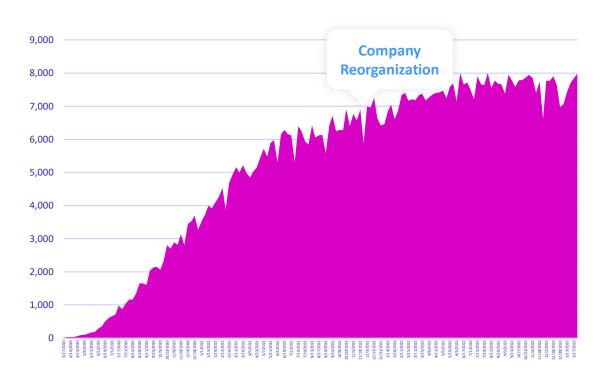
Q4 2022 U.S Net Revenue of \$15.0 Million

15% Q4 Y/Y growth in 2022 RPEs with 23% Q4 Y/Y growth of revenues

Quarterly Franchise RPE Trend



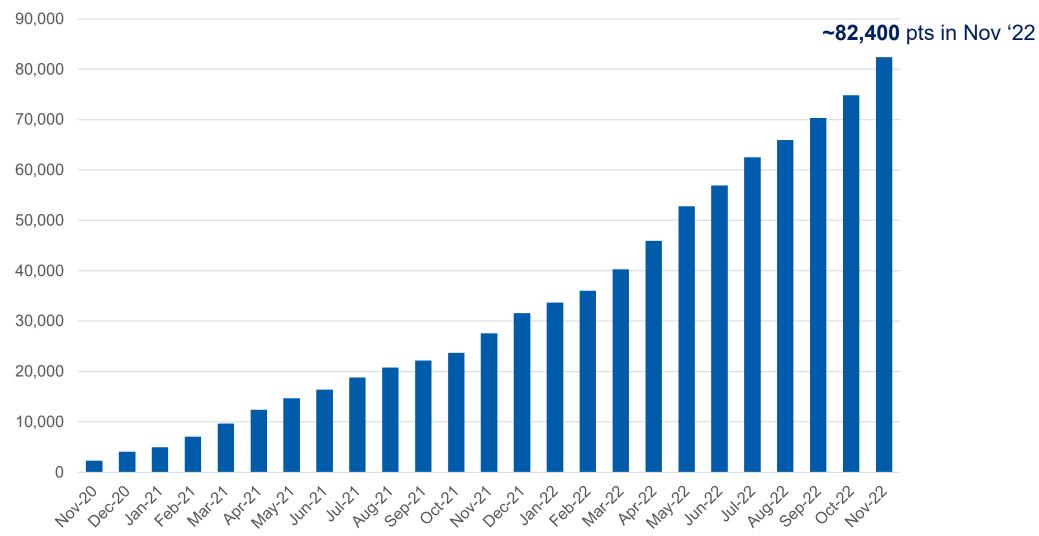
Weekly Franchise RPE Trend Since Launch ¹



^{1.} Through February 3, 2023

^{*}Based on Symphony data. RPE = Retail Prescription Equivalence; derived by normalizing the extended units Rx (no. of tablets) to determine the 30-day supply equivalent

EU Patients on Nilemdo®/Nustendi®, update Nov 2022





Financial Strength to Deliver Growth

Cash runway sufficient beyond CLEAR Outcomes through the end of 2023

\$167 M

2022 Cash, Cash Equivalents & Investment Securities Available-for-Sale

>\$1.2B

Potential Future Ex-U.S. Collaboration Milestones from Partners

\$15.0M

Fourth Quarter 2022 US Net Product Revenue FY Growth 40% Year Over Year

Key Financial Data	
FY 2022 Actual R&D Expense	\$119 Million
FY 2022 Actual SG&A Expense	\$109 Million
FY 2022 Operating Expense ¹	\$228 Million
Q4 2022 Common Shares Outstanding ²	74.6 Million

- 1. Includes \$15M of non-cash stock-based compensation expense
- 2. After accounting for 2.0 million treasury shares to be purchased in the \$50M prepaid forward transaction as part of the November 2020 convertible debt financing

Key Takeaways

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We have a unique and successful outcome study in a large therapeutic category that demonstrates the benefits of bempedoic acid, the active ingredient in NEXLETOL® & NEXLIZET®

We are poised for a major inflection in sales and prescriptions and are targeting blockbuster status

Based on the robustness of the CLEAR Outcomes data, the Company believes it would be entitled to receive milestone payments from collaborative partners upon inclusion of cardiovascular risk reduction data in the US and European labels

THANK YOU



Important Safety Information

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NEXLETOL® Safety Profile

- Contraindications: None
- Warnings and Precautions:
 - Hyperuricemia: NEXLETOL may increase blood uric acid levels, and may lead to the development of gout, especially
 in patients with a history of gout.
 - Tendon Rupture: NEXLETOL is associated with an increased risk of tendon rupture.
- Avoid concomitant use with simvastatin (>20 mg/day) or pravastatin (>40 mg/day) due to increased risk of adverse
 events.
- Most common adverse reactions in ≥2% of patients taking NEXLETOL and more frequently than placebo:
 - Upper respiratory tract infection, muscle spasms, hyperuricemia, back pain, abdominal pain or discomfort, bronchitis, pain in extremity, anemia, and elevated liver enzymes
- Adverse events reported less frequently but still more often than in placebo included benign prostatic hyperplasia and atrial fibrillation

This summary does not reflect the full safety profile – please see https://pi.esperion.com/nexletol/nexletol-pi.pdf

NEXLIZET® Safety Profile

- Contraindication: Known hypersensitivity to ezetimibe tablets
- Warnings and Precautions:
 - Hyperuricemia: Bempedoic acid may increase blood uric acid levels, and may lead to the development of gout, especially in patients with a history of gout.
 - Tendon Rupture: Bempedoic acid is associated with an increased risk of tendon rupture.
- Avoid concomitant use with simvastatin (>20 mg/day) or pravastatin (>40 mg/day). Monitor cyclosporine concentrations
 with cyclosporine. If cholelithiasis is suspected in a patient receiving fenofibrate, consider alternative lipid-lowering
 therapy.
- Most common adverse reactions in >2% of patients taking NEXLIZET and more frequently than placebo:
 - Upper respiratory tract infection, muscle spasms, hyperuricemia, back pain, abdominal pain or discomfort, bronchitis, pain in extremity, anemia, elevated liver enzymes, diarrhea, fatigue, influenza, sinusitis, and arthralgia
- Adverse events reported less frequently but still more often than in placebo included benign prostatic hyperplasia and atrial fibrillation

This summary does not reflect the full safety profile - see https://pi.esperion.com/nexlizet/nexlizet-pi.pdf

References

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