FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

MENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* NEWTON ROGER S					2. Issuer Name and Ticker or Trading Symbol Esperion Therapeutics, Inc. [ESPR]									heck all	ionship of Reporting all applicable) Director		g Person(s) to Issuer 10% Owner			
	_	ERAPEUTICS I				3. Date of Earliest Transaction (Month/Day/Year) 10/16/2018									Officer elow)	(give title		Other (specify below)		
(Street)	N ARBOR MI 48108				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					son	
(City)	(31		Zip)	on Dori	estive.	<u> </u>				4 D:		f 0"	Dono	ficio	II., O.,					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			ction	Execution Date,		3. 4. Securiti		4. Securities	es Acquired (A) or Of (D) (Instr. 3, 4 a			r 5. An And 5) Secu Bene Owne		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or P	rice	Tran		Reported ransaction(s) Instr. 3 and 4)			(11150.4)
Common Stock				10/16/	2018				S ⁽¹⁾		9,400(1)	I	\$	\$50.01 ⁽²⁾		589,326		I)	
Common Stock 10/17/2					2018)18		S ⁽¹⁾		12,673(1)		\$	\$50.02 ⁽³⁾		⁽³⁾ 576,653		I)		
Common Stock 10/18/2					2018	018			S ⁽¹⁾		100(1)			\$50		576,553		I)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year)				emed 4. Transac Code (in Day/Year) 8)				Expirat (Month	tion Da	(ear)	7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		unt	8. Price of Derivative Security (Instr. 5)	ve d / S) B O F R	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Code V (A) (D)			(D)	Date Expiration Exercisable Date Ti			of Title Shares		es											

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 21, 2018.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$50.00 to \$50.08, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$50.00 to \$50.16, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (3) to this Form 4

/s/ Richard B. Bartram, by 10/18/2018 power of attorney

** Signature of Reporting Person

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

- * 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).

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.