FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

DOVEY BRIAN H

(First)

C/O DOMAIN ASSOCIATES, LLC

(Last)

(Middle)

STATEMENT OF CHANGES IN RENEEICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 ed average burden er response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

| Section obligat | n 16. Form 4 or ions may contil tion 1(b). | onger subject to Form 5 nue. See | JIA | File | | uant t | o Secti | | a) of | f the Se | | es Exchan | | of 1934 | | JI 111 | | ll. | | verage burd sponse: | len 0 |
|--|---|--|-----------------------------|--|---|--|---------|-------|------------------------------|---|------------------------------|---------------------|---|-----------------------------------|-------------------------|---|---|---|---------------|---|-------------------------------------|
| 1. Name and Address of Reporting Person* DOMAIN PARTERS VII L P | | | | | | 2. Issuer Name and Ticker or Trading Symbol Esperion Therapeutics, Inc. [ESPR] | | | | | | | | | | 5. Relationship of F (Check all applicab Director | | | ng Per | 10% (| Owner |
| (Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/21/2014 | | | | | | | | | | Officer (below) | give title | | Other below | (specify) | | |
| (Street) PRINCETON NJ 08542 | | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line | | Form file | ed by On | t/Group Filing (Check Applicable by One Reporting Person by More than One Reporting | | | | |
| (City) | (S | tate) (| (Zip) | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - No | n-Deriv | /ative | Sec | curitie | es Ac | qu | iired, | Dis | osed o | f, or E | 3ene1 | ficial | ly O | wned | | | | 1 |
| Date | | | 2. Trans Date (Month/ | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transa Code (8) | | 4. Securit Disposed 5) | | and Secur Benet | | ficially d Following | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indired Beneficial Ownersh (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (D | " | Price | (I | ransactio | 3 and 4) | | | , | |
| | | | <u> </u> | | /2014 P 500,000 A ive Securities Acquired, Disposed of, or Benefici | | | | | | | | \$20 2,566,935 | | | | (1)(2)(3) | | | | |
| | | l é | | | | | | | | | | sed of, onvertib | | | | Owi | nea | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | | 4. Transa Code 8) | | of | | E | 5. Date Exercis Expiration Date Month/Day/Yea | | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | (| 3. Pric Deriva Securi Instr. | ttive de ity Se 5) Be Ov Fo Re | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | , C | .0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | Benefici Ownersh t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | | ate xercisal | | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |
| l | | Reporting Person* | | | | | | | | | | | | | | | | | | | |
| | MAIN ASS LMER SQI | (First) OCIATES, LLC JARE | (Mid | dle) | | | | | | | | | | | | | | | | | |
| (Street) | TON | NJ | 085 | 42 | | | | | | | | | | | | | | | | | |
| (City) | | (State) | (Zip) | | | | | | | | | | | | | | | | | | |
| ı | nd Address of L JAMES | Reporting Person* | | | | | | | | | | | | | | | | | | | |
| | MAIN ASS LMER SQI | (First) OCIATES, LLC UARE | (Mid | dle) | | | | | | | | | | | | | | | | | |
| (Street) PRINCE | TON | NJ | 085 | 42 | | | | | | | | | | | | | | | | | |
| (City) | | (State) | (Zip) | | | | | | | | | | | | | | | | | | |
| 1. Name a | nd Address of | Reporting Person* | | | | | | | | | | | | | | | | | | | |

| ONE PALMER SQUARE | | | | | | | | | |
|--|---------|----------|--|--|--|--|--|--|--|
| (Street) PRINCETON | NJ | 08542 | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | |
| 1. Name and Address of Reporting Person* TREU JESSE I | | | | | | | | | |
| (Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE | | | | | | | | | |
| (Street) PRINCETON | NJ | 08542 | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | |
| 1. Name and Address of Reporting Person* SCHOEMAKER KATHLEEN K | | | | | | | | | |
| (Last) C/O DOMAIN ASS ONE PALMER SQ | | (Middle) | | | | | | | |
| (Street) PRINCETON | NJ | 08542 | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | |
| Name and Address of Reporting Person* <u>VITULLO NICOLE</u> | | | | | | | | | |
| (Last) C/O DOMAIN ASS ONE PALMER SQ | | (Middle) | | | | | | | |
| (Street) PRINCETON | NJ | 08542 | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | |
| 1. Name and Address of Reporting Person* Halak Brian K | | | | | | | | | |
| (Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE | | | | | | | | | |
| (Street) PRINCETON | NJ | 08542 | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | |

Explanation of Responses:

3. As managing members of Domain Associates, LLC, each Reporting Owner listed below may also be deemed to indirectly beneficially own 21,471 shares of Common Stock held by Domain Associates, LLC.

Remarks:

/s/ Kathleen K. Schoemaker, as 10/21/2014
Managing Member of One
Palmer Square Associates VII,
LLC, General Partner of
Domain Partners VII, L.P.,
individually, and as Attorneyin-Fact for J. Blair, B. Dovey,

^{1.} The securities reported as directly beneficially owned by the designated Reporting Person may be deemed to be indirectly beneficially owned by each of the Reporting Owners listed below, each of whom is a managing member of One Palmer Square Associates VII, LLC, the sole general partner of the designated Reporting Person. Pursuant to Instruction 4(b)(iv) of Form 4, each such individual has elected to report as indirectly beneficially owned the entire number of securities owned by the designated Reporting Person, however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.

^{2.} As managing members of the sole general partner of DP VII Associates, L.P., each Reporting Owner listed below may also be deemed to indirectly beneficially own 35,253 shares of Common Stock held by DP VII Associates, L.P.

J. Treu, N. Vitullo and B. Halak

** Signature of Reporting Person Date

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.