

WHEN DO YOU PLAN TO GET
YOUR NEXT **CHOLESTEROL TEST?**

ESPERION Q4 & FY 2021 EARNINGS PRESENTATION

FEBRUARY 22, 2022

ESPERION

FORWARD-LOOKING STATEMENTS & DISCLOSURES

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BUSINESS OVERVIEW

SHELDON KOENIG, PRESIDENT AND CEO

ESPERION[®]

Q4 2021 & RECENT HIGHLIGHTS

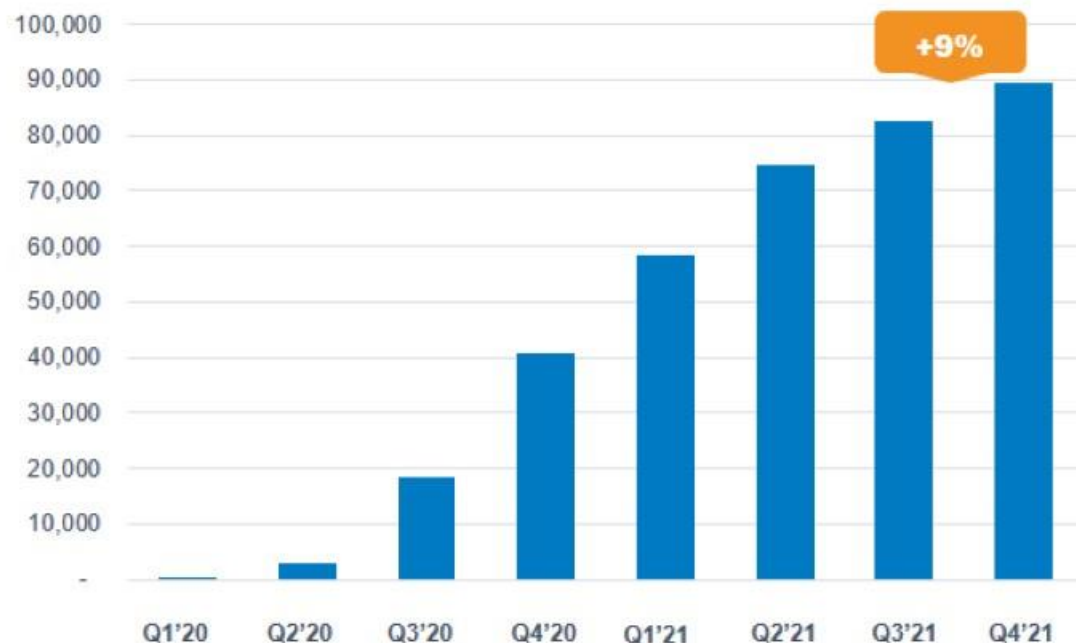
- CLEAR Outcomes trial reached **90% MACE Accumulation** in February
- U.S net product revenue of NEXLETOL® and NEXLIZET® recognized **growth of 12%** from Q3 2021 to **\$12.2 million** in Q4 2021
- Demonstrated sequential **prescription growth of 9%** from Q3 2021 with over **70,000** cumulative patients
- **Strengthened capital position** with \$209 million financing, securing path to **CLEAR Outcomes top-line** and the foreseeable future following those results
- Ended Q4 2021 with **\$309.3 million** in cash, cash equivalents, restricted cash and investment securities
- Announced **transformative strategic plan and expense structure** to support the long-term growth of NEXLETOL® and NEXLIZET®



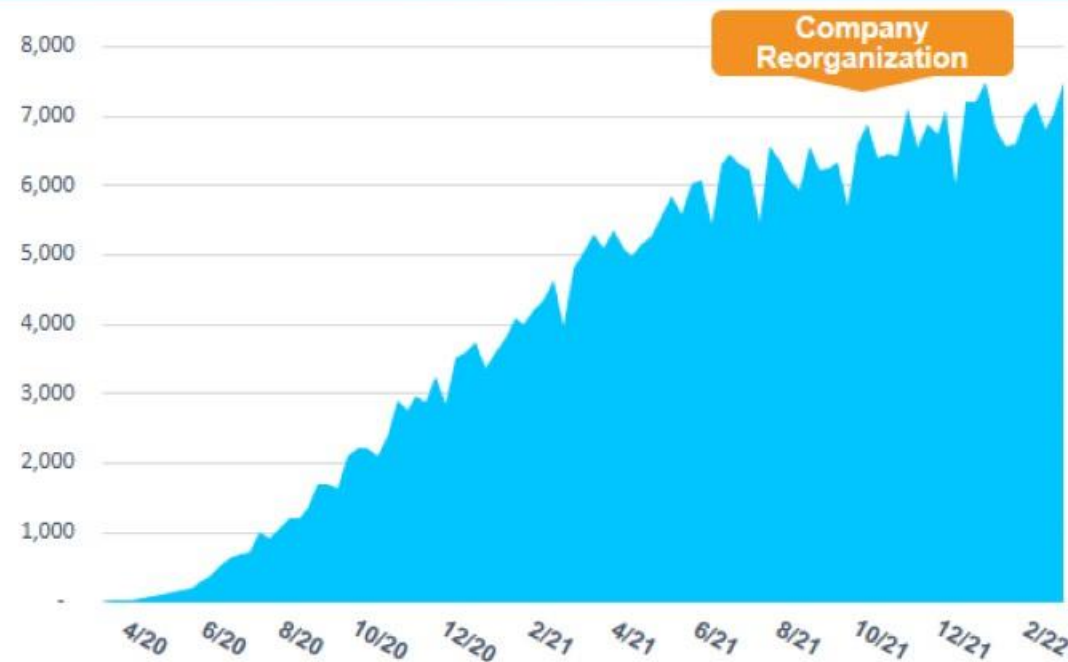
U.S. REVENUE OF \$12.2 MILLION

FOCUSED ON DRIVING CONSISTENT GROWTH AS WE APPROACH CVOT RESULTS

Quarterly Franchise RPE Trend



Weekly Franchise RPE Trend Since Launch ¹



1. Through February 11, 2022

*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

CLEAR OUTCOMES STRATEGICALLY DESIGNED

ACHIEVED 90% MACE ACCUMULATION IN FEBRUARY 2022; TOPLINE EXPECTED Q1 2023

- A 14,014-patient randomized, double-blind, placebo-controlled clinical trial with median follow up anticipated to be 3.75 years
 - One of largest and longest of any non-statin trial
- Unique patient population where included patients must have all of the following:
 - Established ASCVD or at high-risk of developing ASCVD
 - LDL-C ≥ 100 mg/dL on maximally-tolerated lipid-lowering therapy including no statin
- Primary outcome: composite of the time to first cardiovascular death, nonfatal myocardial infarction, nonfatal stroke, or coronary revascularization
- Event-driven trial that will continue until 1,620 patients experience a primary endpoint
 - Minimum of 810 hard ischemic events (cardiovascular death, nonfatal myocardial infarction or nonfatal stroke); Achieved >100% MACE-3
 - Minimum treatment duration of 36 months and a projected median treatment exposure of 42 months

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FINANCIAL UPDATE

RICK BARTRAM, CFO

ESPERION

FINANCIAL STRENGTH TO DELIVER GROWTH

RECENT FINANCING & ADJUSTED COST BASE EXTENDS CASH RUNWAY

\$12.2M Q4 2021 U.S. Product Revenue

\$309.3M Q4 2021 Cash, Cash Equivalents,
Restricted Cash & Investment Securities
Available-for-Sale ¹

>\$1.2B Future Ex-U.S. Collaboration Milestones
from Daiichi Sankyo & Otsuka

Key Financial Data

FY 2021 Op Ex Actual ² **\$305 Million**

FY 2022 R&D Guidance **\$100 - \$110 Million**

FY 2022 SG&A Guidance **\$120 - \$130 Million**

FY 2022 Op Ex Guidance ³ **\$220 - \$240 Million**

Q4 2021 Common Shares
Outstanding ^{4, 5} **60.9 Million**

1. Includes \$50M of restricted cash and \$209M net proceeds from December Follow-on offering

2. Includes \$24M of non-cash stock-based compensation expense

3. Includes \$25M of anticipated non-cash stock-based compensation expense

4. 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

5. Inclusive of approximately 32.1M shares issued for December Follow-on offering

ANTICIPATING INCREASED FOCUS ON CARDIOVASCULAR DISEASE PREVENTION



Cardiovascular disease was worsened by the COVID-19 pandemic^{1,2}

- Lockdowns led people to postpone procedures and skip diagnostic tests, as well as avoid seeking care for health emergencies
- COVID-19 survivors across the globe have been left with a 63% higher risk for heart attack and a 52% higher risk of stroke
- Risk of cardiovascular problems was increased for all people, no matter age, gender, or health status



ESPERION is a leading biotech in cardiovascular disease prevention

- Increasing access to NEXLETOL® and NEXLIZET®
- Completing the CLEAR Outcomes trial
- Continuing to progress our pipeline that includes an oral PCSK9 inhibitor and an ACL inhibitor platform

THANK YOU
THANK YOU



IMPORTANT SAFETY INFORMATION



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 $\geq 2\%$ 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>