ESPERION Q12022 EARNINGS PRESENTATION

MAY 3, 2022

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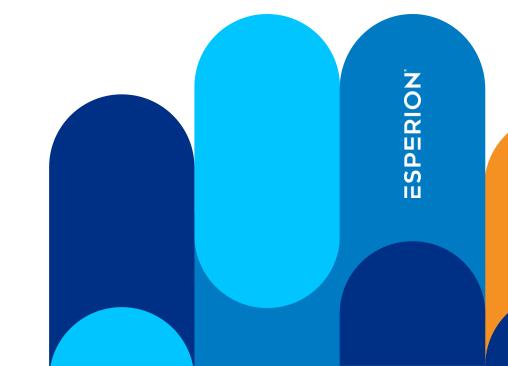
FORWARD-LOOKNG STATEMENTS & DISCLOSURES

This presentation contains forward-looking statements that are made pursuant to the safe harbor provisions of the federal securities laws, including statements regarding marketing strategy and commercialization plans, current and planned operational expenses, future operations, commercial products, clinical development, including the timing, designs and plans for the CLEAR Outcomes study and its results, plans for potential future product candidates, financial condition and outlook, including expected cash runway, 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.



BUSINESS OVERVIEW

SHELDON KOENIG, PRESIDENT AND CEO



Q1 2022 & RECENT HIGHLIGHTS

- Executing against our goals of growing NEXLETOL[®] and NEXLIZET[®] and advancing the CLEAR Outcomes trial
- U.S net product revenue of NEXLETOL[®] and NEXLIZET[®] recognized growth of approximately 109% Y/Y to \$13.4 million in Q1 2022
- Royalty and Partner revenue grew approximately 244% Y/Y to \$5.5 million in 1Q 2022
- Q1 2022 Operational Expenses were down 32% Y/Y
- Quarterly Retail Prescription Equivalents (RPE) grew +56.7% Y/Y and +6.5% Q/Q
- CLEAR Outcomes trial approaching 95% MACE Accumulation
- Ended Q1 2022 with \$268.5 million in cash, cash equivalents, restricted cash and investment securities

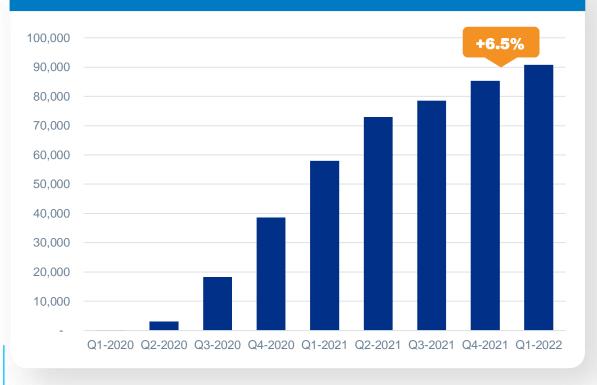




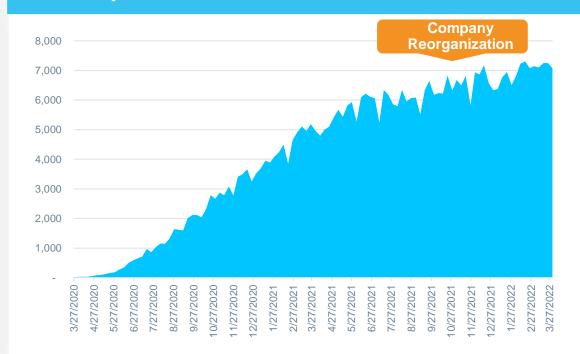
U.S REVENUE OF \$13.4 MILLION

FOCUSED ON DRIVING CONSISTENT GROWTH AS WE APPROACH CVOT RESULTS

Quarterly Franchise RPE Trend



Weekly Franchise RPE Trend Since Launch¹



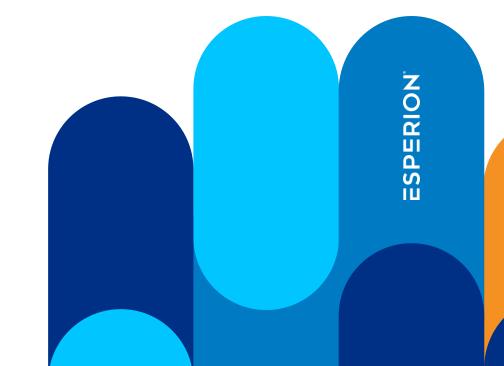
1. Through April 1, 2022

*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

CLINICAL & SCIENTIFIC UPDATE

JOANNE FOODY, M.D., CHIEF MEDICAL OFFICER



ANTICIPATING INCREASED FOCUS ON CARDIOVASCULAR DISEASE PREVENTION



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

- 4.1% increase in age-adjusted death rate from heart disease between 2019 and 2020³
- 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 awareness of NEXLETOL® and NEXLIZET® today
- Completing the CLEAR Outcomes trial
- Continuing to progress our pipeline that includes an oral PCSK9 inhibitor and an ACL inhibitor platform which will participate in a market valued at over \$11 billion in 2026⁴



^{1.} As COVID-19 Drags on, the Cardiology Fallout May Haunt for Years | tctmd.com

^{2. &}lt;u>https://www.science.org/content/article/covid-19-takes-serious-toll-heart-health-full-year-after-recovery</u>

^{3.} JAMA Health Forum – Health Policy, Health Care Reform, Health Affairs | JAMA Health Forum | JAMA Network

^{4.} https://s21.q4cdn.com/488056881/files/doc_events/2022/04/CV-Investor-Event_Final.pdf

CLEAR OUTCOMES STRATEGICALLY DESIGNED

APPROACHING 95% MACE ACCUMULATION; 100% MACE EXPECTED BY YEAR END, AND TOPLINE RESULTS Q1 2023

- A 14,014-patient <u>randomized</u>, 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; conducted in the modern-day medical environment
- 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

ADVANCING VISIBILITY TO DOCTORS

SCIENTIFIC PUBLICATIONS BETTER CHARACTERIZE EFFICACY IN SUB-POPULATIONS

DIABETES, OBESITY AND METABOLISM A JOURNAL OF PHARMACOLOGY AND THERAPEUTICS

ORIGINAL ARTICLE 🖻 Open Access 💿 😧 😒

Bempedoic acid in patients with type 2 diabetes mellitus, prediabetes, and normoglycaemia: A post hoc analysis of efficacy and glycaemic control using pooled data from phase 3 clinical trials

Lawrence A. Leiter MD 🗙 Maciej Banach MD, PhD, Alberico L. Catapano MD, PhD, P. Barton Duell MD, Antonio M. Gotto Jr MD, DPhil, Ulrich Laufs MD, PhD, G. B. John Mancini MD ... See all authors 🗸

First published: 03 January 2022 | https://doi.org/10.1111/dom.14645



Journal of Clinical Lipidology Available online 13 March 2022 In Press, Corrected Proof (1)



Efficacy and safety of bempedoic acid in patients not receiving statins in phase 3 clinical trials

Ulrich Laufs MD ^옷ª 편, Christie M Ballantyne MD ^b편, Maciej Banach MD, PhD ^c편, Harold Bays MD ^d 편, Alberico L. Catapano PhD, MD (hc) ^e편, P. Barton Duell MD ^f편, Anne C. Goldberg MD ^g편, Antonio M. Gotto MD, DPhil ^h편 , Lawrence A. Leiter MD ⁱ편, Kausik K. Ray MD, MPhil ^j편, LeAnne T. Bloedon MS, RD ^k편, Diane MacDougall MS ^k 편, Yang Zhang PhD ^k편, G. B. John Mancini MD ¹편



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FINANCIAL UPDATE

SHELDON KOENIG, PRESIDENT AND CEO



FINANCIAL STRENGTH TO DELIVER GROWTH

Kov Financial Data

CASH RUNWAY SUFFICIENT BEYOND CLEAR OUTCOMES READ-OUT

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\$13.4M	Q1 2022 U.S. Product Revenue	FY 2022 R&D Guidance	\$100 - \$110 Million
	Q1 2022 Cash, Cash Equivalents,	FY 2022 SG&A Guidance	\$120 - \$130 Million
\$268.5 M	Restricted Cash & Investment Securities Available-for-Sale ¹	FY 2022 Op Ex Guidance ²	\$220 - \$240 Million
>\$1.2B	Potential Future Ex-U.S. Collaboration Milestones from Daiichi Sankyo & Otsuka	Q1 2022 Common Shares Outstanding ³	61.1 Million

- 1. Includes \$50M of restricted cash
- 2. 2. Includes \$25M of anticipated non-cash stock-based compensation expense

3. 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 finar



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 ≥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



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