

ESPERION: WHAT'S NEXT?

January 2021

SAFE HARBOR

FORWARD-LOOKING STATEMENTS

This presentation contains forward-looking statements that are made pursuant to the safe harbor provisions of the federal securities laws, including statements regarding the clinical development and commercialization plans for bempedoic acid tablet and the bempedoic acid / ezetimibe fixed dose combination tablet, including ESPERION's timing, designs, plans for announcement of results regarding its CLEAR Outcomes study and other ongoing and future clinical studies for bempedoic acid tablet and the bempedoic acid / ezetimibe combination fixed dose tablet, timing for the review and approval of expanded indications for their effect on cardiovascular events, ESPERION's expectations for the market for medicines to lower LDL-C, including the commercial launch and market adoption of bempedoic acid tablet and the bempedoic acid / ezetimibe fixed dose combination tablet in the United States and European Union, the development of the oral PCSK9 inhibitor program, prospects for its successful development, and ESPERION's financial outlook, including expectations for future revenues from its product sales, partnership collaborations and other sources. 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, delays or failures in ESPERION's clinical development and commercialization plans, or approval of expanded indications, that existing cash resources may be used more quickly than anticipated, that Otsuka and DSE are able to successfully commercialize its products, the impact of COVID-19 on our business, clinical activities and commercial development 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.



ESPERION | Helping Patients Meet Goals

Everybody knows someone struggling with their cholesterol.

We believe changing the world requires focus: to discover, develop, and commercialize oral, once daily, non-statin medicines for battling bad cholesterol.

And people should be able to afford and access their medicines.

ESPERION has a proven 20-year history of delivering innovation toward this singular mission and we are the only publicly held company with a singular focus on fighting bad cholesterol.

ESPERION LEADERSHIP TEAM

ALL WITH STRONG CONNECTIONS TO OUR PURPOSE



**Tim Mayleben,
President and Chief
Executive Officer**

Tim's father passed away at 48 from a heart attack and his wife currently takes NEXLETOL after years of statin intolerance and battling uncontrolled familial high cholesterol



**Rick Bartram,
Chief Financial
Officer**

Rick's father had CVD and T2D, and high cholesterol uncontrolled by statins alone, which resulted in several MIs and stroke prior to his death at age 58



**Sheldon Koenig,
Chief Operating
Officer**

Dedicated to the Cardiovascular field, both in the US and globally, for over 15 years, Sheldon's passion is patient education and ensuring health care providers have treatment options



**Ashley Hall,
Chief Development
Officer**

Despite being a lifelong professional and all around athlete, Ashley's father had his first heart attack when he was in his 50's and a second one in his 70's due to uncontrolled familial high cholesterol



**Ken Fiorelli,
Chief Technical
Operations Officer**

Several of Ken's family members have struggled with high cholesterol and T2D. Treatment with statins did not bring their cholesterol levels to target

~97 Million People in the United States Have High Levels of Bad Cholesterol

Did you know?

- 9.6 Million Patients in the U.S. with High LDL-C Are Not on Statins, Often due to Tolerability Concerns
- 8.7 Million Patients in the U.S. Are Taking Statins, but Need Additional Therapy to Reach Their LDL-C Goals

~18 Million
Need
Additional
LDL-C
Lowering

~44 Million
Diagnosed;
34 Million on a
Statin

A close-up portrait of a man with a grey beard and glasses, wearing a dark hat. He is looking slightly to the right of the camera with a neutral expression. The background is a blurred outdoor setting.

MEET DAVID

He's genetically predisposed to high LDL-C Levels due to inherited *familial hypercholesterolemia*

Despite starting a statin 5 years ago, with consistent healthy eating and exercise, he has *not met physician recommended LDL-C levels*

For example purposes, not actual patient

MEET ANNE

She has been rotated on and off a number of statins with varying doses over the last years,

...but all have caused *deep fatigue and muscle pain*

She can't get to her goal

For example purposes, not actual patient



#1 Cause of Death is Cardiovascular Disease

- Significantly less innovation versus other therapy areas⁽¹⁾
- Causes more annual deaths than all forms of cancers combined⁽²⁾
- Accounts for ~1 in 3 deaths in the U.S. and Europe⁽²⁾

CDC estimates heart disease deaths will increase 25% by 2030⁽³⁾

⁽¹⁾ Mckinsey & Co.
⁽²⁾ World Health Organization
⁽³⁾ CDC 2017-2030



Elevated bad cholesterol is an established risk factor for cardiovascular (CV) disease

Why make taking medicine hard?



Most innovation in our therapy area is delivered by injection

Which one would you choose?

4 out of 5 patients prefer a pill⁽¹⁾



Patients and HCPs have been waiting for years for oral, once daily non-statin medicines

(1) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3003606/>

WHAT DO PATIENTS WANT AND NEED IN NEW LDL-C LOWERING MEDICINES? *FAMILIARITY*

Convenient and Well-Known

Reduce their already high bad cholesterol in a significant way in a form they know

Easy to Have

Daily pills that are easy to take and refill, completely avoiding clinics and pharmacies if desired

Safe and Tolerable

With less muscle pain

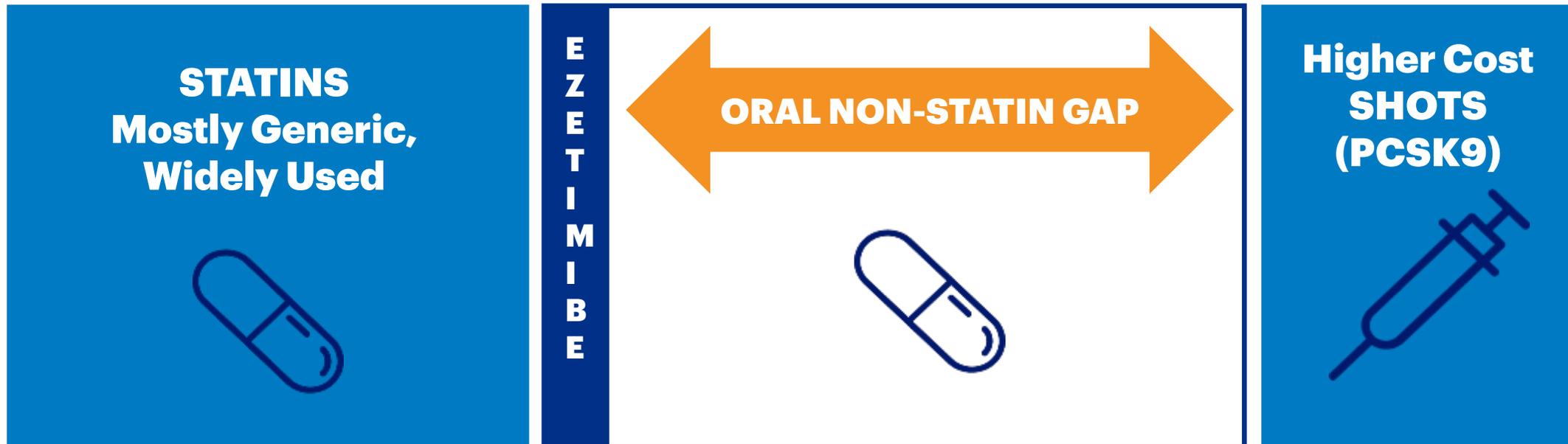
Works well with other medications

Many patients have multiple treatment needs due to diabetes or inflammation



ESPERION OFFERS INNOVATIVE, ORAL TREATMENT OPTIONS TO FILL LARGE UNMET NEED

Total Bad Cholesterol Lowering Paradigm



Total LDL-C Non-Statin Market (Adjunct)



BUILDING A GLOBAL LEADER IN LIPID MANAGEMENT

**We are Evolving into a
Leading Global,
Research Driven,
Commercially Thriving
Virtual Company**

2019

- No Approved Products
- No Field Team
- 2 Development Programs in Progress
- No Alliances

2024 Aspirations

- Several Approved Products with Multiple Indications
- Multiple Programs and Indications in Development
- Multiple Development and Commercial Alliances with Leading Global Companies

PARTNERING FOR GLOBAL COMMERCIAL SUCCESS

Companies with Proven Cardiovascular Excellence

Daiichi Sankyo Europe

(Product branded as NILEMDO™ & NUSTENDI™)



European Collaboration Overview:

- Largest EU agreement in history
- \$900M in milestones plus royalties
 - \$300M received to date
 - 15-25% royalty on all net sales
 - Up to \$300M milestone linked to CLEAR CVOT
- Marketing Authorization Transfer to DSE complete
- Launched both medicines in Germany Nov. 2020
- 1,000+ Cardiology-focused commercial team

Otsuka Pharmaceutical Co.



Japan Collaboration Overview:

- Largest Japan agreement in history
- +\$600M in milestones and development costs plus royalties
 - \$60M received to date
 - 15-30% royalty rate on all net sales
 - Up to \$50M milestone linked to CLEAR CVOT
- Otsuka responsible for development, regulatory approvals, and commercialization in Japan

Rest of World Deal (Non EU, Japan) to be announced Q1 2021

RECENT PRODUCT LAUNCHES

OUR FIRST-IN-CLASS MEDICINES WERE FDA-APPROVED AND LAUNCHED IN 2020

NEXLETOL[®]
(bempedoic acid) Tablets
are the first oral,
once-daily, non-statin **LDL-C**
lowering medicine approved
since 2002 for indicated
patients

Now Available in U.S.



NEXLETOL[®] and NEXLIZET[®] available by prescription only.
Known as NILEMDO[™] (bempedoic acid) &
NUSTENDI[™] (bempedoic acid and ezetimibe) in Europe

NEXLIZET[®]
(bempedoic acid and ezetimibe)
Tablets
are the first oral non-statin, **LDL-C**
lowering combination medicine
ever approved

Now Available in U.S.



NEXLETOL[®] and NEXLIZET[®] are each indicated as an adjunct to diet and maximally tolerated statin therapy for the treatment of adults with heterozygous familial hypercholesterolemia (HeFH) or established atherosclerotic cardiovascular disease (ASCVD) who require additional lowering of LDL-C.

Limitations of Use: The effect of NEXLETOL[®] and NEXLIZET[®] on cardiovascular morbidity and mortality has not been determined.

Important safety information can be found on slides 34/35 and online:

<https://pi.esperion.com/nexletol/nexletol-pi.pdf> and <https://pi.esperion.com/nexlizet/nexlizet-pi.pdf>

READY, SET, GO.

1

Differentiated
Pricing,
Positioning
& Messaging

2

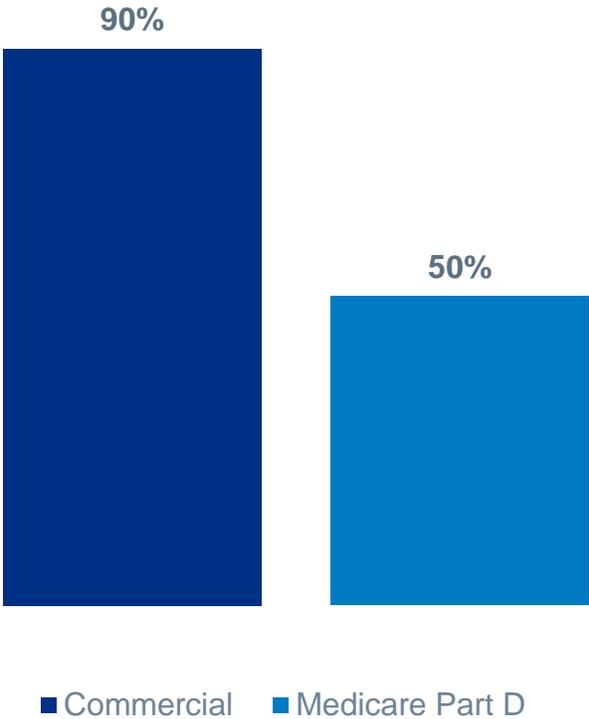
Broad, High
Quality
Managed
Care Coverage

3

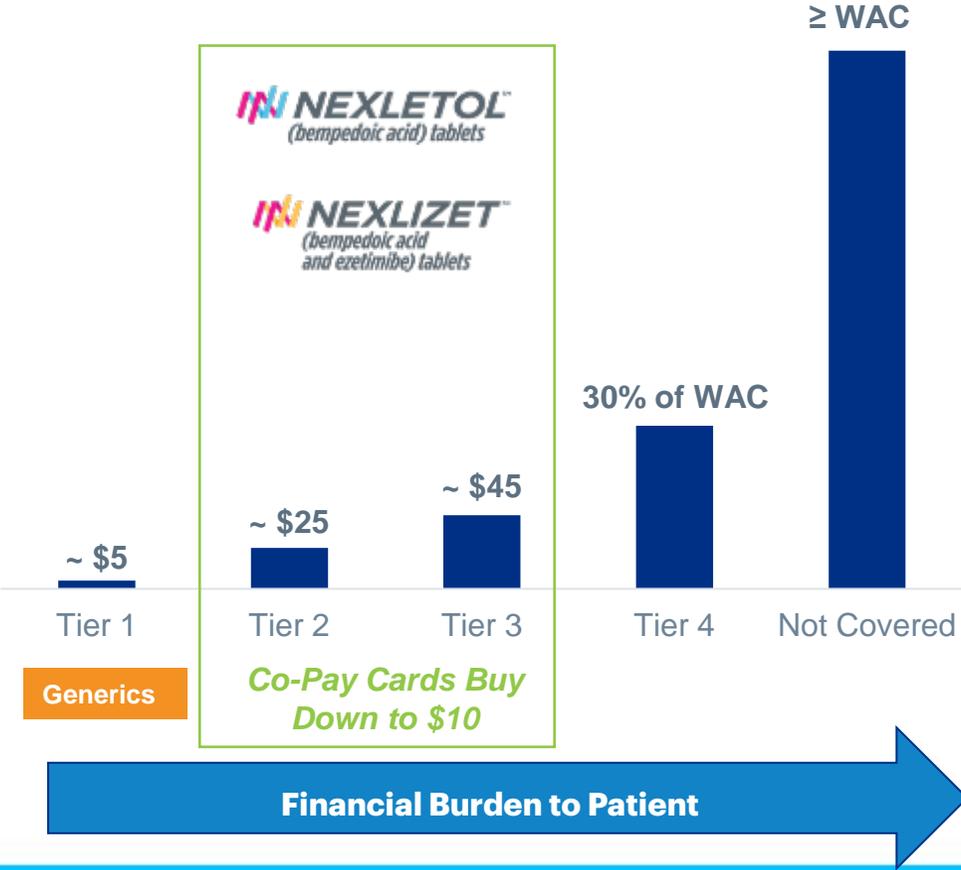
Health Care
Provider
Engagement &
Education

BROAD AND HIGH-QUALITY PAYOR COVERAGE

Payor Coverage Exceeding Expectations



Coverage is in Preferred Tiers with Lower Patient Costs



PROGRESS, DESPITE PANDEMIC

6,500+

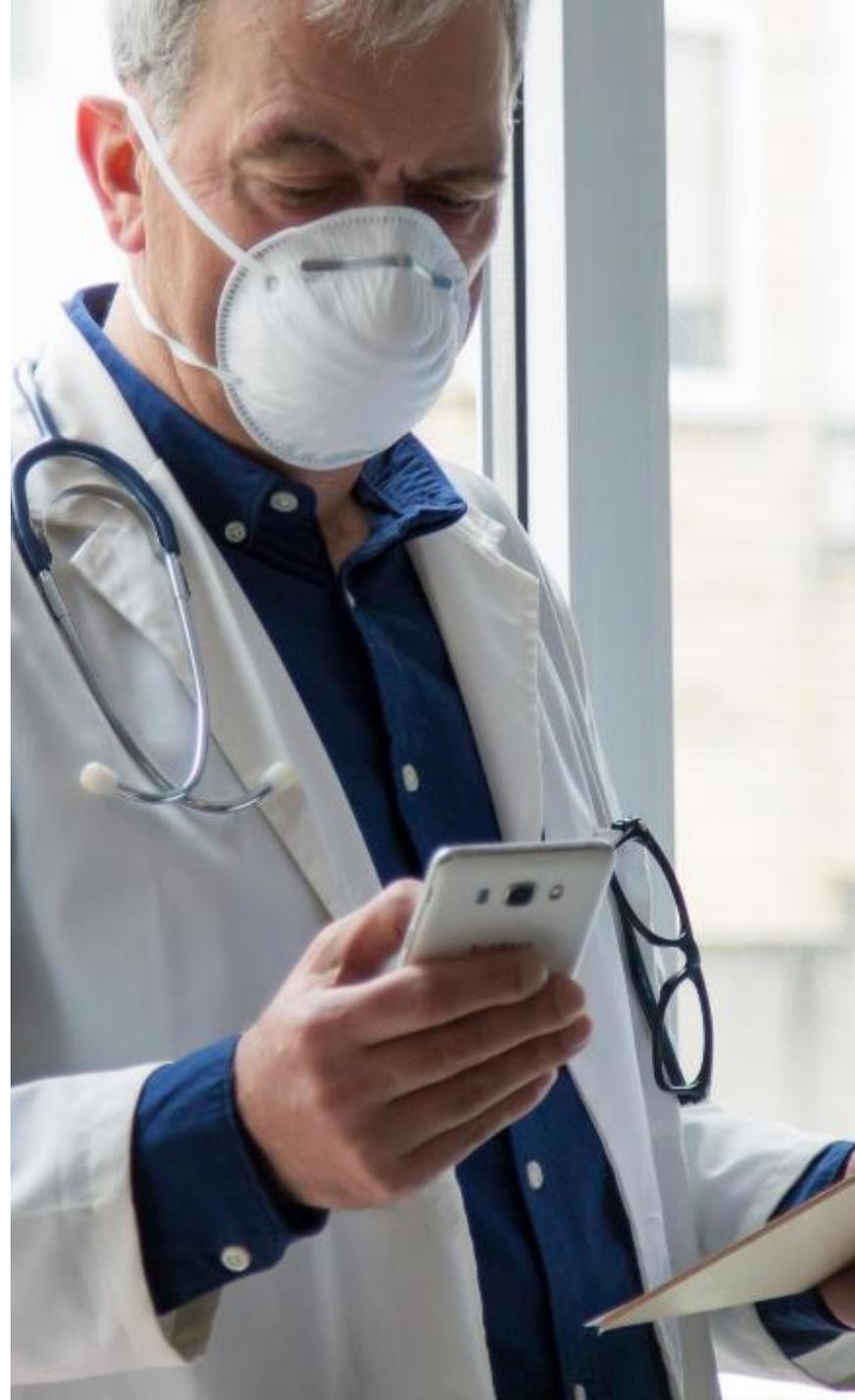
Doctors writing at least one
prescription

3,000+

patients taking our medicines
every week

370,000+

Seven-day starter packs
Physicians have requested
and received to begin patients
on our medicines easily



IMPACTS FROM COVID-19:

Doctors offices
were not open for
initial launch period

When open:

Some do not see
industry reps

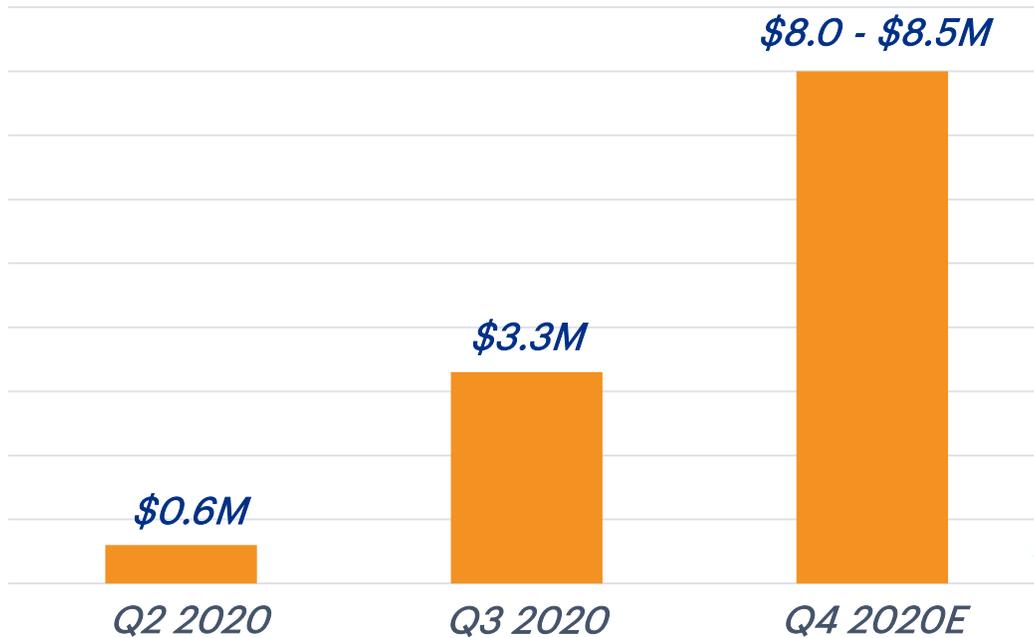
Doctors focused on
acute patients first

PCP visits down
overall as patients
avoid in-person
interactions

SIGNIFICANT U.S. NET PRODUCT SALES GROWTH

While New-to-Brand Rx in overall LDC-C Market Remains Depressed

U.S. Net Product Revenue

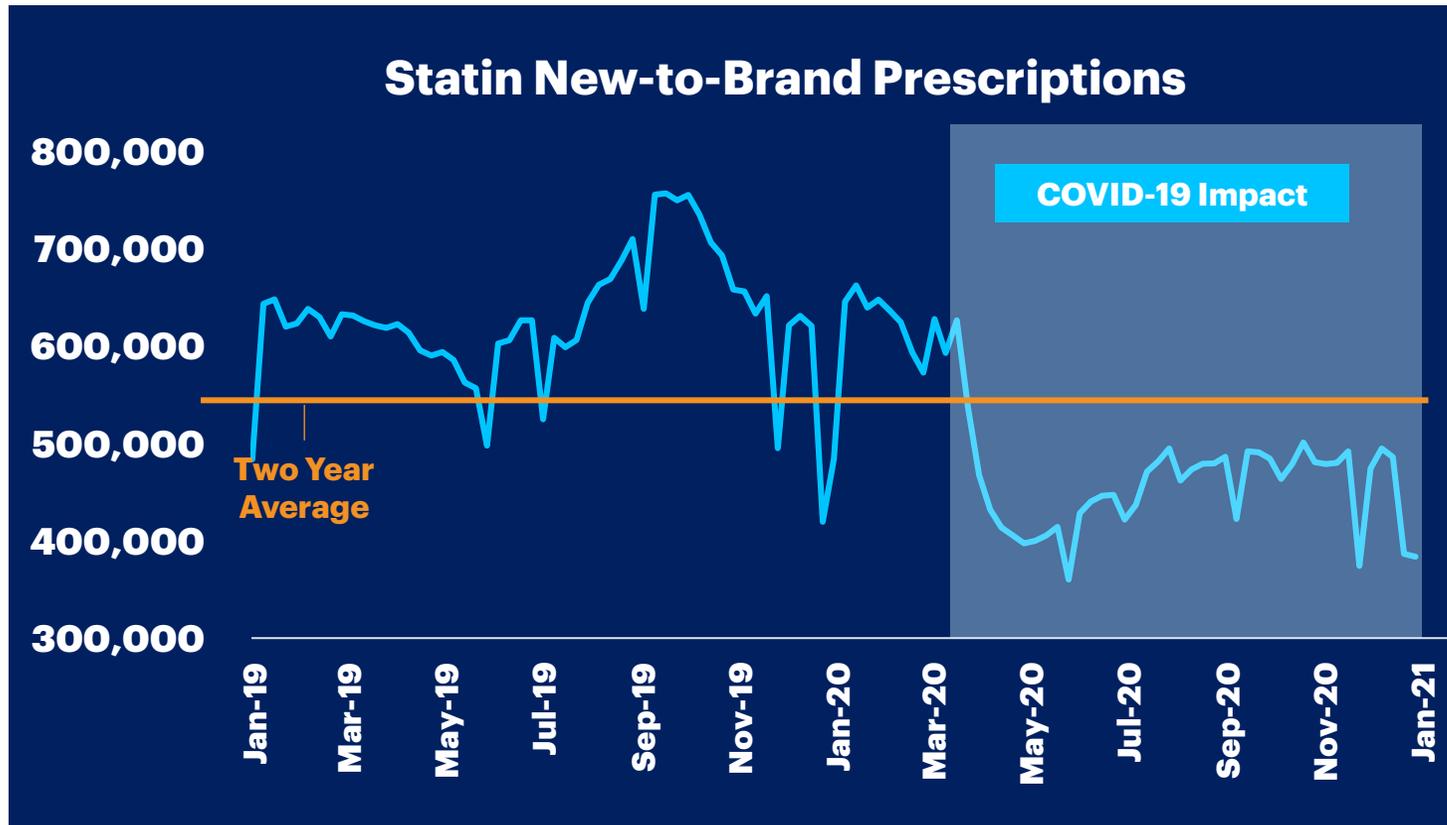


Unaudited Q4 2020 U.S. Net Product Sales

\$8.0 - \$8.5 Million

Up >140% quarter over quarter

STATIN RECOVERY LEADING INDICATOR FOR NEXLETOL AND NEXLIZET



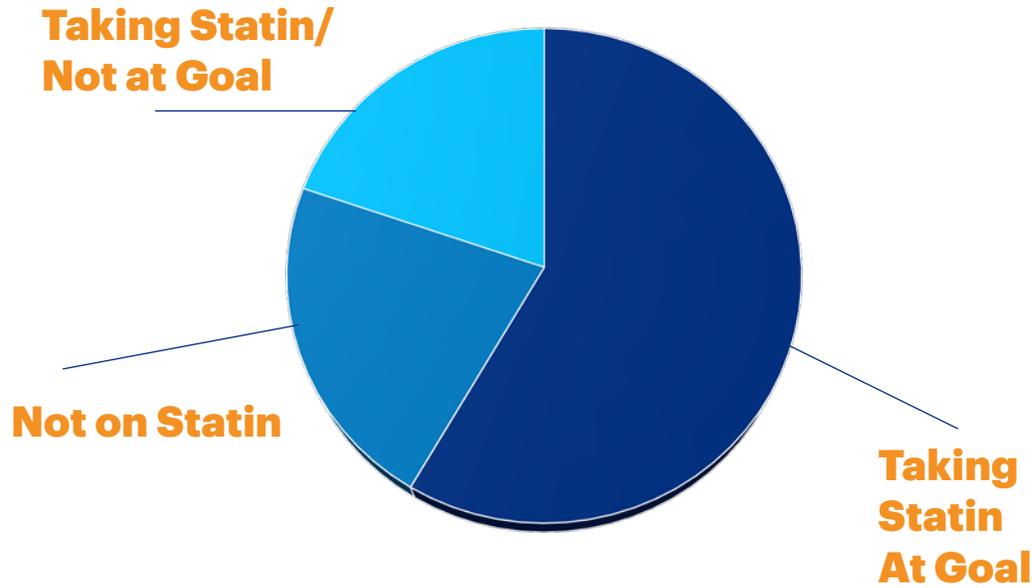
Up To
TWO out of **TEN**

People who start a statin require alternative medicine⁽¹⁾

As new-to-brand statin scripts return to growth, we expect to capture an associated growth rate

(1) Bruckert E, Hayem G, Dejager S, Yau C and Begaud B. Mild to moderate muscular symptoms with high-dosage statin therapy in hyperlipidemic patients--the PRIMO study. Cardiovasc Drugs Ther. 2005;19:403-14.

SIGNIFICANT OPPORTUNITY IN A UNIQUELY SIZED MARKET

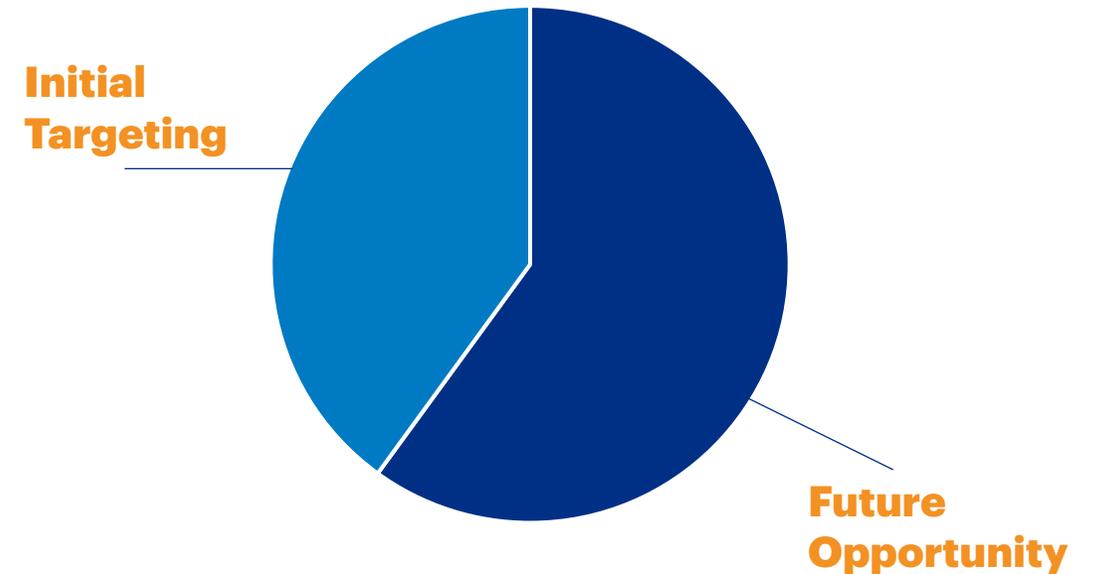


Market Opportunity: Patients

- 44M hypercholesterolemia diagnosed patients in the US
- 8.7M are on statins but not at LDL-C goal
- 9.6M are currently not on statin therapy to address high LDL cholesterol²

Market Opportunity: Prescribers

- 245 million LDL-C prescriptions written annually in the US by ~720,000 prescribers
- ~38,000 highest-volume prescribers make up 40% of the entire LDL-C market, or an average of 2,600 Rx per year





**CLEAR OUTCOMES
STUDY PROVIDES
POTENTIAL
INDICATION
EXPANSION TO
PATIENTS**

First-of-its-kind cardiovascular outcomes trial, following more than 14,000 patients with documented statin intolerance

There are approximately 10 million statin intolerant patients in the US.

We've reached over 50% of primary 4-component MACE endpoints

Fully enrolled in August 2019 and on-track to read-out in 2H 2022

ORAL PCSK9I PROGRAM ANNOUNCEMENT

**ORAL PCSK9I
PROGRAM
ANNOUNCEMENT**



**DEVELOPING
PCSK9
INHIBITOR AS A
PATIENT-
PREFERRED
PILL**



RIGHT TEAM

Strategic fit with
company mission
and existing
pipeline and
product portfolio



RIGHT PROGRAM

Targeting allosteric
inhibition of PCSK9
Potential first-in-class,
no small molecule
close to availability
for patients



RIGHT FOCUS

Only company
focused exclusively
on oral medicines
for LDL-C lowering
Accomplished
development record

STRONG FOUNDATION FOR GROWTH



DIVERSIFIED REVENUE STREAMS ON TOP OF STRONG CASH POSITION



U.S. Net Product Sales increased

>140%

**quarter over quarter
Q3 \$3.3M**

**Unaudited Q4 \$8.0M -
\$8.5M**

**Ex-U.S.
Collaboration
Milestones**

+\$213M YTD

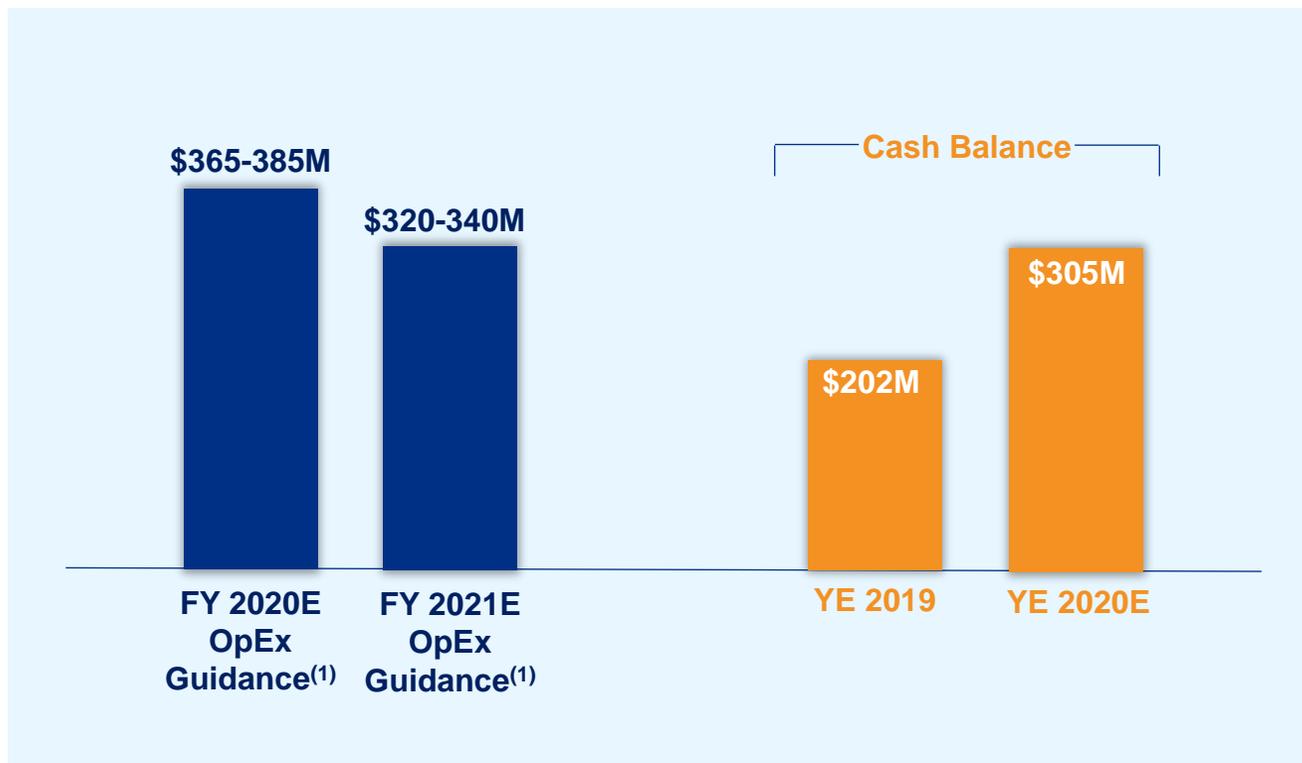
1st

**Royalty
Expected
Q4 2020**

**Ex-U.S.
Royalty
Revenues**

Cash Balance ~\$305M at end of Q4 2020

COST MANAGEMENT SUPPORTS OUR STRONG FINANCIAL POSITION



Key Financial Data	
FY Revenue	No Guidance Before 2022
FY 2021 R&D Guidance	\$120 - \$130 Million
FY 2021 SG&A Guidance	\$200 - \$210 Million
FY 2021 Op Ex Guidance ⁽¹⁾	\$320 - \$340 Million
FY 2020 Common Shares Outstanding ⁽²⁾	25.9 Million

¹ Includes \$30M of non-cash stock based compensation expense

² Accounts for \$50M prepaid forward feature

STRONG INTELLECTUAL PROPERTY PROVIDES SECURITY FOR AMPLE GROWTH AND VALUE CREATION

- 100% U.S. and ROW Rights (outside of EU & Japan) to NEXLETOL® and NEXLIZET®
- Composition of matter and/or market exclusivity coverage through mid-2031* in major markets
- Life-cycle management opportunities to extend exclusivity both with NEXLETOL® and NEXLIZET® and future formulations
 - Formulation, process manufacturing and methods of use pending applications may extend exclusivity through 2040, if issued



Composition of matter patent/IP coverage at least through mid-2031* (with patent term extension) in the United States.



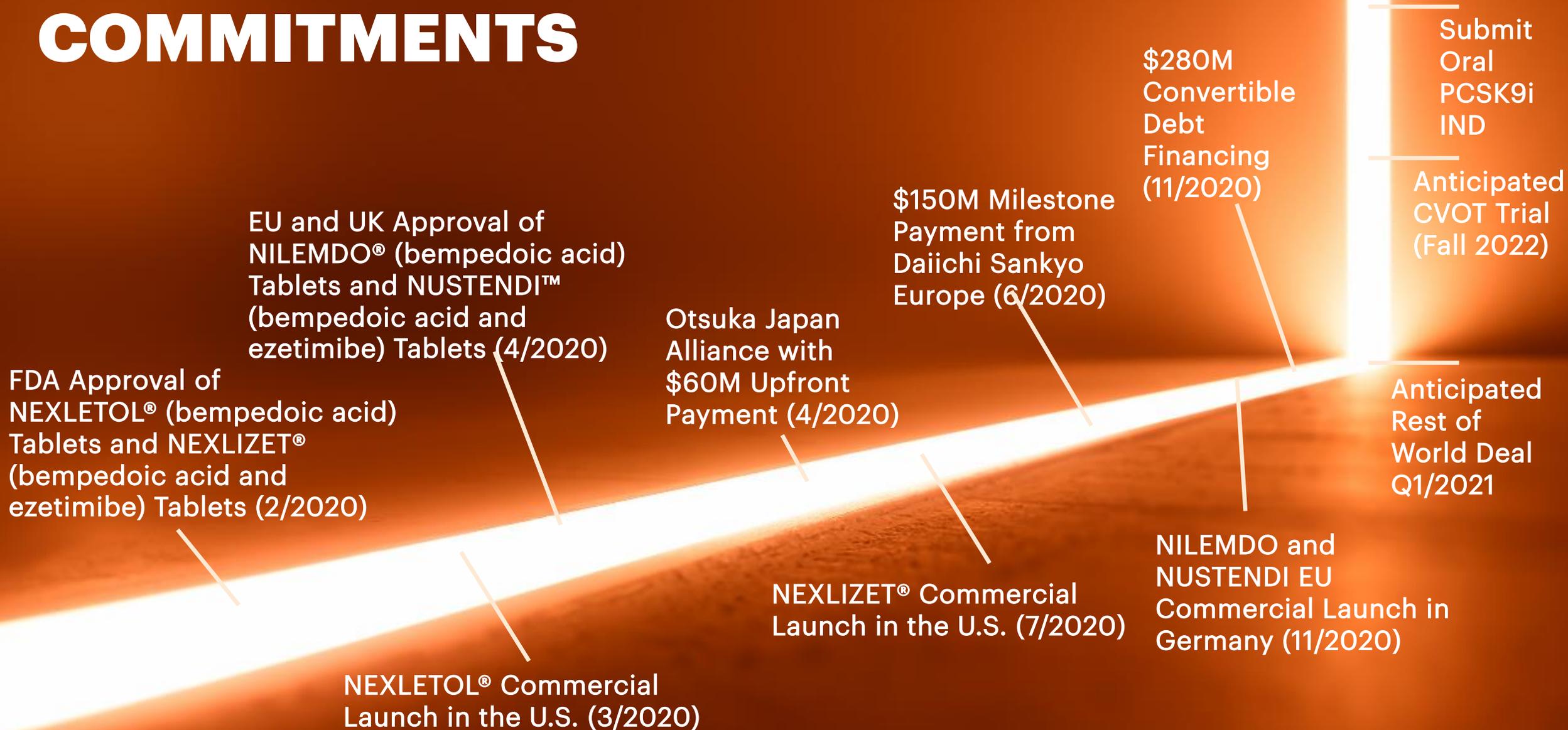
Composition of matter patent/IP coverage through at least 2028 (with patent term extension) in parallel with ten years of post-approval data exclusivity in Europe (i.e. February 2030).



Composition of matter patent/IP coverage at least through 2028 (with patent term extension).
Eight years of post-approval data exclusivity in Japan is expected following anticipated regulatory approval in ~2025.

*With pediatric extension

A HISTORY OF DELIVERING ON COMMITMENTS



DRIVING

Adoption of NEXLETOL[®]
and NEXLIZET[®]
in the U.S.

COLLABORATING

With our commercial and
development partners
outside of the U.S.

ADVANCING

The next generation of
innovative, oral, non-
statin LDL-C lowering
medicines, including our
new oral PCSK9 inhibitor

THE ONLY PUBLICLY-TRADED COMPANY COMPLETELY FOCUSED ON MAKING CHOLESTEROL MANAGEMENT EASY.

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>