

ESPERION®

VISION
2040

Executing Today While Building for Tomorrow

J.P. Morgan Healthcare Conference | January 2026

Sheldon Koenig, President and CEO

Forward-looking Statements & Disclosures

This investor 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 and business development plans, current and planned operational expenses, expected profitability, future operations, commercial products, clinical development, plans for potential future product candidates, financial condition and outlook, including expected cash runway and profitability, 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 investor presentation 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 net sales, profitability, and growth of Esperion’s commercial products, clinical activities and results, supply chain, commercial development and launch plans, business development, the outcomes and anticipated benefits of legal proceedings and settlements, and the risks detailed in Esperion’s filings with the Securities and Exchange Commission. Any forward-looking statements contained in this investor presentation 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 investor presentation, other than to the extent required by law.

Esperion at a Glance

Commercial

**NEXLETOL**[®]
(bempedoic acid) 180mg tablets

**NEXLIZET**[®]
(bempedoic acid/ezetimibe) 180mg/10mg tablets

Strong Financial Position

**Reach Sustainable
Profitability in 2026**

Durable Cash Flows

Strong Balance Sheet

Attractive P&L Profile

Partnerships & Pipeline

Triple Combination

**NEXT-GENERATION ORAL LIPID-LOWERING
COMBINATIONS**

Bempedoic acid, ezetimibe, and statin
(atorvastatin or rosuvastatin)

ESP-2001

NEXT-GENERATION ACLY INHIBITOR

Indication: Primary Sclerosing Cholangitis (PSC)

Discovery Programs

**EXPANDING BEYOND
CARDIOVASCULAR DISEASE**

Emerging product candidates with the potential to address multiple forms of chronic kidney disease, including both broad and rare indications

Multi-Year Proven Track Record of Execution

Consistent U.S. Commercial Execution

- Delivered strong year-over-year revenue and TRX growth
- Expanded the product label, significantly broadening the U.S. addressable patient population to more than 70 million patients
- Achieved broad national commercial and Medicare payer coverage
- Secured ANDA settlements highlighting potential longer term exclusivity runway

Disciplined Financial Management

- Strengthened the capital structure
- Meaningfully reduced debt
- Positioned to support continued commercial expansion, pipeline advancement, and strategic BD in 2026 and beyond

Global Partner Execution

- Japan: Successfully executed the commercial launch
- Canada: Secured regulatory approval for NEXLETOL
- Europe: Achieved inclusion in ESC/EAS guidelines as a Class I, Level A recommendation

Pipeline Execution

- Advanced the pipeline with selection of ESP-2001 selected as a lead preclinical candidate for PSC
- Progressed triple combination program
- Initiated early renal discovery programs

2025 | A Pivotal Year; the Strongest in Esperion's History



FY 2025 PRELIMINARY U.S. NET
PRODUCT SALES

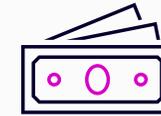
\$156M – \$160M

+35% to 38% Y/Y growth



RETAIL PRESCRIPTION
EQUIVALENTS Y/Y

+34%



PRELIMINARY YE 2025
CASH & CASH EQUIVALENTS

\$168M

TOTAL PRELIMINARY REVENUE

\$400M – \$408M

+20% to 23% Y/Y

+55% to 59% excluding one-time milestones

Commercial Execution Drove Significant Growth in 2025



A purple circular graphic with a dark purple border. The text inside reads: "LARGE, UNDERPENETRATED MARKET" in white, "~70M" in large yellow font, and "addressable patients in the U.S." in yellow.

Clear Commercial Focus: Statin-intolerant and statin-resistant patients (~30% overall market ¹)

Winning Commercial Strategy: Balanced in-person & digital promotion, including piloted DTC efforts & invested in competitive reimbursement initiatives

Growing adoption
+34% Retail Prescription Equivalents Y/Y

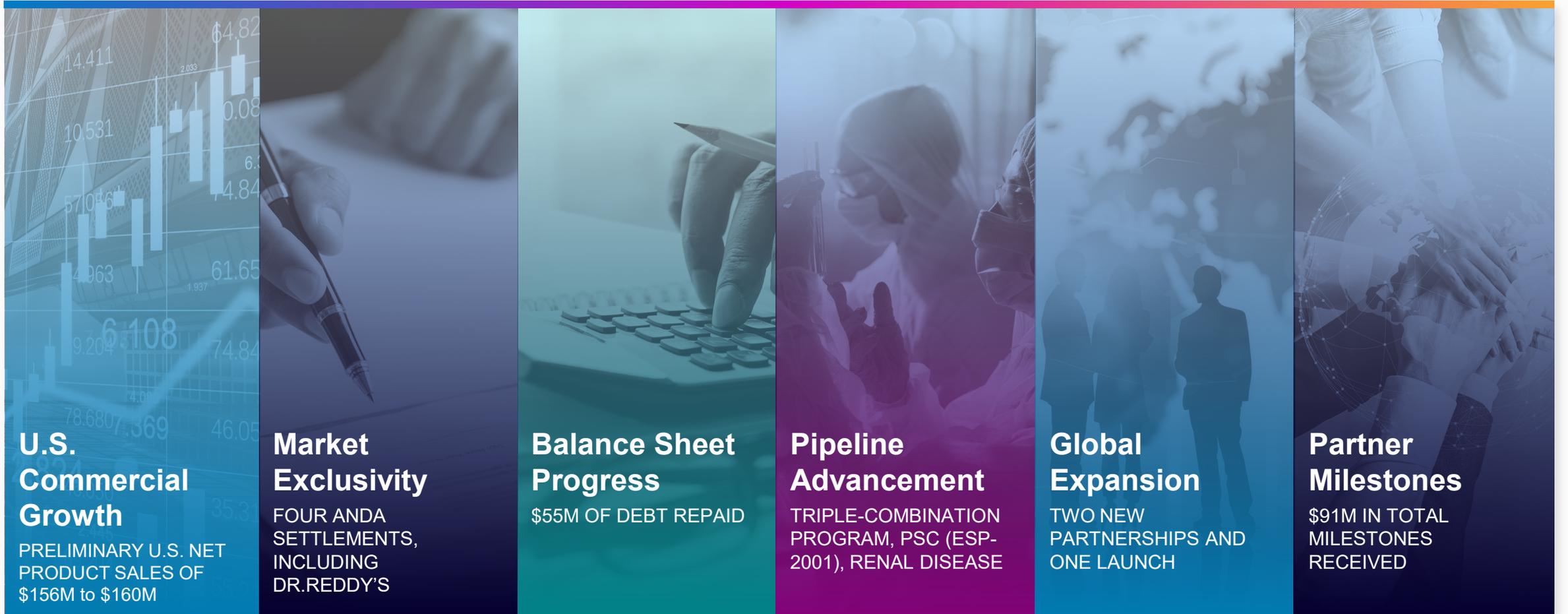
Prescriber base expanded
~25% Y/Y, now ~45,000 prescribing HCPs

Broad payer coverage established
>90% commercial lives / >90% Medicare

¹ Cheeley MK, et al. J Clin Lipidol. 2022 Jul-Aug;16(4):361-375

Year in Review

Highlights of 2025



ESPERION[®]

“

Our Vision 2040 is grounded in proven execution and defines how we scale Esperion into a global, multi-product pharmaceutical company.

”

From Execution to Ambition



Strengthen and Expand the Bempedoic Acid Franchise

- Continue to unlock the multi billion-dollar potential of the NEXLETOL/NEXLIZET franchise



Build a Diversified, Multi-Product Portfolio

- Leverage established U.S. commercial infrastructure to support product acquisitions, co-promotions, in-licensing, and revenue-share partnerships



Advance the Next-Generation ACLY Pipeline

- Build a diversified portfolio of internally developed, wholly owned ACLY inhibitors globally targeting rare and orphan diseases

Achieve at least 5 marketed products by 2040 through a combination of BD and internal pipeline advancement

The background of the slide features a repeating pattern of molecular structures, specifically hexagonal rings with various atoms and bonds, rendered in a light purple color against a darker purple gradient background.

ESPERION[®]

**Strengthen and Expand the
Bempezoic Acid Franchise**

Major Catalysts to Drive Growth in 2026 and Beyond

U.S. Guideline Momentum

Expected inclusion in U.S. guidelines in early 2026



Market Exclusivity

Potential expansion supported by initial ANDA settlements



Commercial Investment

Continued sales and marketing expansion



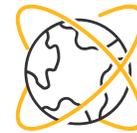
Oral Triple Combination

Lifecycle management opportunity



International Expansion

Milestone payments and royalty revenues



Improved Gross Margins

Tech transfer with European partner



Oral Triple Combination Opportunity

	Triple Combo ¹	Ezetimibe ²	Obicetrapib ³	PCSK9i ⁴
Approval Status	In development	Approved/Generic	In development	4 approved products
LDL-C reduction	~ 60% - 70%	19%	33%	~ 48% - 71%
Administration				
Dosing	Once daily	Once daily	Once daily	Bi-weekly to 6 months

Highly compelling efficacy: published literature suggests >60% LDL-C reduction

Oral option with injectable-like efficacy

Builds directly on the bempedoic acid franchise, leveraging existing commercial infrastructure

Approval anticipated in 2027

1. Product in development, not approved, LDL-C data based on literature evaluating co administered products (Rubino et.al Atherosclerosis 320 (2021) 122-128, Mahajan et.al. J. Clin. Lipidology (2004), Vol 18 (5) e867-872; 2. USPI for Zetia (November 2024), monotherapy and on statin; 3. New Amsterdam Pharma corporate presentation (Jan 2025); 4. USPIs for Repatha (Nov 2024), Praluent (March 2024), Leqvio (July 2024) and Lerochol (Dec 2025) No head-to-head studies have been conducted; cross-study data reflect different study designs, populations, and other features.

Bempedoic Acid: Partner-Led Expansion Outside the U.S.

Multi-Billion \$ Global Opportunity Provides Additional Revenue Streams

APPROVED IN
41
Countries globally

	Europe, Asia & South America	Japan	Israel	Australia & New Zealand	Canada
Partner	Daiichi Sankyo Europe / Daiichi Sankyo Co., Ltd.	Otsuka Pharmaceutical Co., Ltd.	Neopharm Israel	CSL Seqirus	HLS Therapeutics
Highlights	<ul style="list-style-type: none"> Included in ESC/EAS guidelines as a Class I, Level A recommendation Introduced oral triple-combination therapy >600,000 patients treated to date Regulatory approval and reimbursement for NILEMDO in France 	<ul style="list-style-type: none"> Launched in December 2025 with favorable pricing Represents the third largest cardiovascular prevention market globally 	<ul style="list-style-type: none"> Approval anticipated in the first half of 2026 	<ul style="list-style-type: none"> Approval anticipated in Q4 2026 	<ul style="list-style-type: none"> NILEMDO approved in Q4 2025 Expects approval for NEXLIZET in 2026
Milestones and Royalties	Tiered royalties and additional sales milestones	Tiered royalties and additional sales milestones	Tiered royalties and additional milestones	Upfront and near-term milestone payments	Upfront payment, milestones and tiered royalties

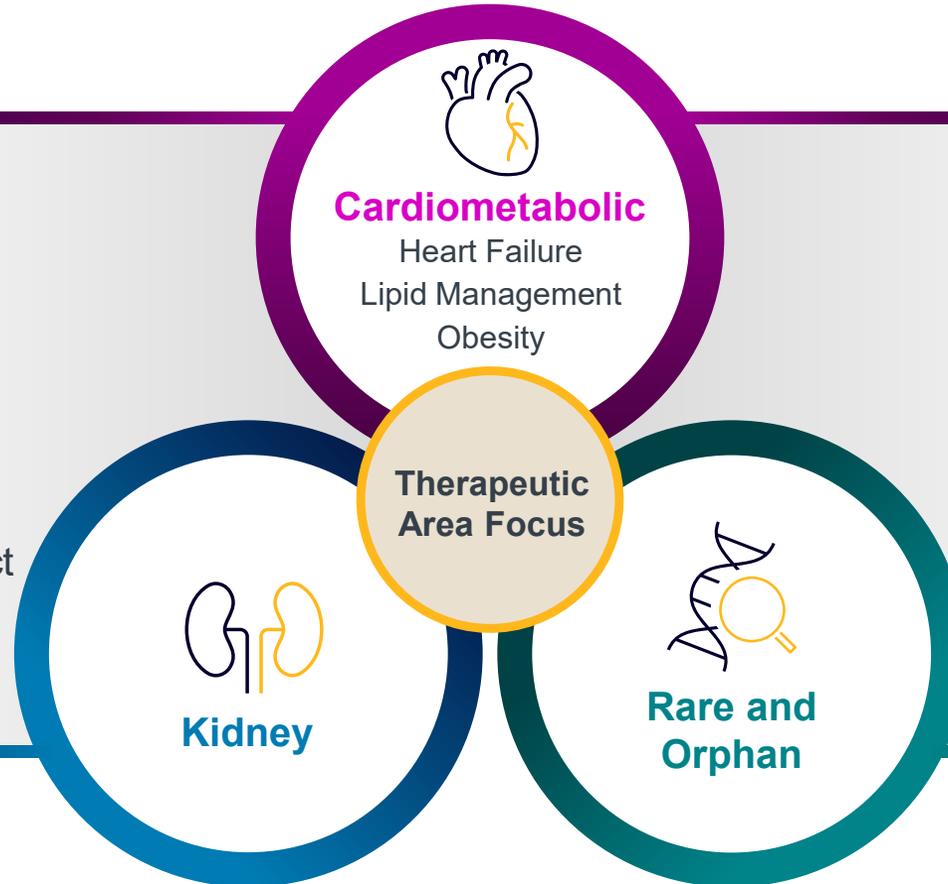
The logo for Esperion, featuring the word "ESPERION" in a bold, white, sans-serif font with a registered trademark symbol (®) to the upper right. The background is a blue-to-purple gradient with a faint molecular structure pattern of hexagons and connecting lines.

ESPERION[®]

**Build a Diversified,
Multi-Product Portfolio**

Portfolio Growth Through Partnerships

- Leverage established U.S. commercial infrastructure and expertise to expand product portfolio
- Partner of choice across synergistic call points
- Multiple opportunities for product acquisitions, in-licensing, co-promotions, and revenue share partnerships



- Each a multi-billion dollar market opportunity on its own
- Each to reach millions of patients in need
- Each can create considerable value

The logo for Esperion, featuring the word "ESPERION" in a bold, black, sans-serif font with a registered trademark symbol (®) at the end. The background is a gradient from purple to yellow, overlaid with a faint, light-colored molecular structure pattern of hexagons and connecting lines.

ESPERION®

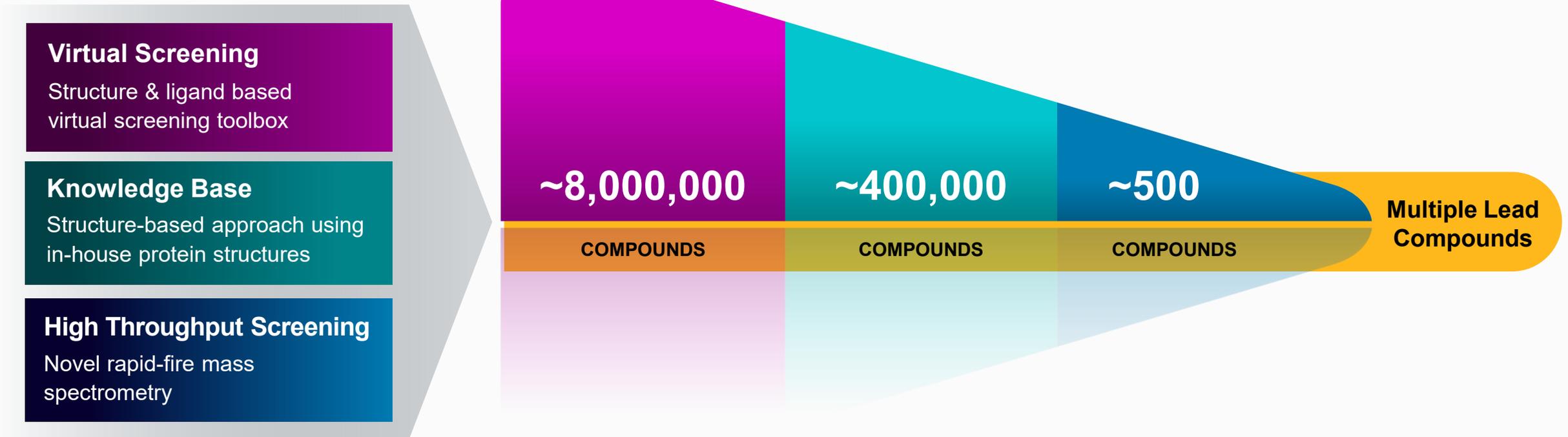
**Advance the Next-Generation
ACLY Pipeline**

Leveraging a World-Class ACLY Platform to Expand the Pipeline

Deep expertise in ACLY biology, a target with broad potential across multiple disease pathways

Lead preclinical candidate ESP-2001 for the treatment of primary sclerosing cholangitis (PSC)

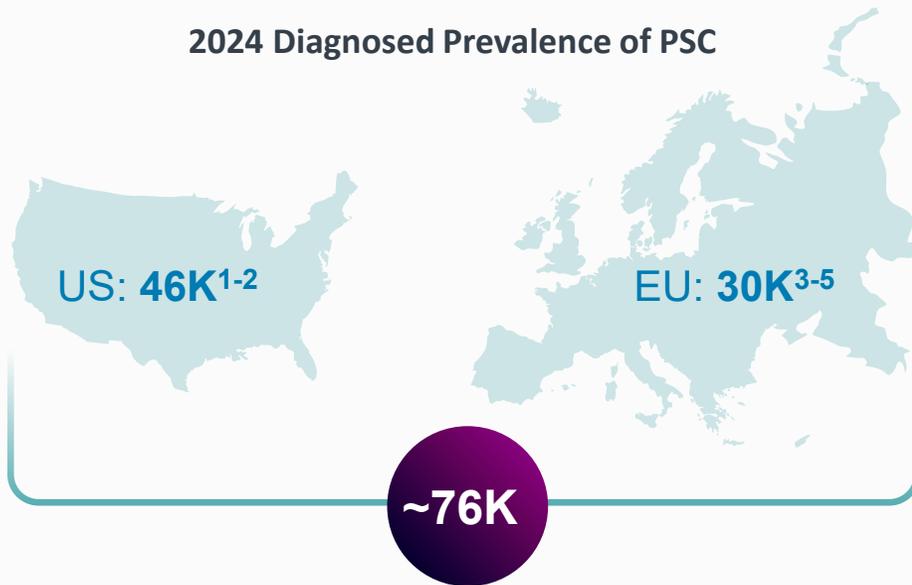
Actively advancing programs in renal disease



PSC: High Unmet Need Driving Significant Market Opportunity

PSC: A Rare and Progressive Liver Disease

2024 Diagnosed Prevalence of PSC



>\$1B

Annual Market Opportunity Estimate

- **No approved therapies** with proven efficacy to cure or halt PSC progression
- Potential **Orphan Drug Designation & Fast Track Approval**
- Discovery program is **internally developed and wholly-owned globally**
- **IND-enabling studies initiated**, with the goal of submitting an IND and beginning first-in-human studies in 2026

This program highlights the broader potential of ACLY biology

FY 2026 Operating Expense Guidance

FY 2026 R&D Guidance

\$40 – 50 M

FY 2026 SG&A Guidance

\$170 – 195 M

FY 2026 OpEx Guidance¹

\$210 – 245 M

- Reflects continued investment in U.S. commercial execution
- Supports advancement of pipeline programs, including ESP-2001 and triple combination program
- Maintains focus on disciplined spend and return on investment

1. Includes ~\$15 million of non-cash stock-based compensation expense

From Execution to Ambition



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Advance the Next-Generation ACLY Pipeline

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Achieve at least 5 marketed products by 2040 through a combination of BD and internal pipeline advancement

Experienced Leaders, Breakthrough Results



Sheldon Koenig
PRESIDENT AND CHIEF
EXECUTIVE OFFICER



Ben Halladay
CHIEF FINANCIAL
OFFICER



John Harlow
CHIEF COMMERCIAL
OFFICER



Betty Jean Swartz
CHIEF BUSINESS
OFFICER



Glenn Brame
CHIEF TECHNICAL
OPERATIONS OFFICER



Ben Looker, Esq.
GENERAL COUNSEL



Stephen Pinkosky
VP, EARLY & PRE-CLINICAL
DRUG DISCOVERY



LeAnne Bloedon
VP, CLINICAL
DEVELOPMENT



Heather Persh
VP, HUMAN RESOURCES



Satish Nachaegari
VP, GLOBAL REGULATORY
AFFAIRS



The logo for ESPERION, featuring the word in a bold, white, sans-serif font with a registered trademark symbol. The background is a dark purple gradient with a faint, repeating pattern of hexagonal molecular structures.

ESPERION[®]

Important Safety Information

NEXLETOL[®] (bempedoic acid) Important Safety Information

- NEXLIZET is indicated:
- The bempedoic acid component of NEXLIZET and NEXLETOL is indicated to reduce the risk of myocardial infarction and coronary revascularization in adults who are unable to take recommended statin therapy (including those not taking a statin) with:
 - established cardiovascular disease (CVD), or
 - at high risk for a CVD event but without established CVD.
- As an adjunct to diet:
 - NEXLIZET, alone or in combination with other LDL-C lowering therapies, to reduce LDL-C in adults with primary hyperlipidemia, including HeFH.
 - NEXLETOL, in combination with other LDL-C lowering therapies, or alone when concomitant LDL-C lowering therapy is not possible, to reduce LDL-C in adults with primary hyperlipidemia, including HeFH.
- NEXLETOL is contraindicated in patients with a prior serious hypersensitivity reaction to bempedoic acid or any of the excipients. Serious hypersensitivity reactions, such as angioedema, have occurred.
- Hyperuricemia: NEXLETOL may increase blood uric acid levels, which may lead to gout. Hyperuricemia may occur early in treatment and persist throughout treatment, returning to baseline following discontinuation of treatment. Assess uric acid levels periodically as clinically indicated. Monitor for signs and symptoms of hyperuricemia, and initiate treatment with urate-lowering drugs as appropriate.
- Tendon Rupture: NEXLETOL is associated with an increased risk of tendon rupture or injury. Tendon rupture may occur more frequently in patients over 60 years of age, in those taking corticosteroid or fluoroquinolone drugs, in patients with renal failure, and in patients with previous tendon disorders. Discontinue NEXLETOL at the first sign of tendon rupture. Consider alternative therapy in patients who have a history of tendon disorders or tendon rupture.
- The most common adverse reactions in the primary hyperlipidemia trials of NEXLETOL in $\geq 2\%$ of patients and greater than placebo were upper respiratory tract infection, muscle spasms, hyperuricemia, back pain, abdominal pain or discomfort, bronchitis, pain in extremity, anemia, and elevated liver enzymes.
- The most common adverse reactions in the cardiovascular outcomes trial for NEXLETOL at an incidence of $\geq 2\%$ and 0.5% greater than placebo were hyperuricemia, renal impairment, anemia, elevated liver enzymes, muscle spasms, gout, and cholelithiasis.
- Discontinue NEXLETOL when pregnancy is recognized unless the benefits of therapy outweigh the potential risks to the fetus. Because of the potential for serious adverse reactions in a breast-fed infant, breastfeeding is not recommended during treatment with NEXLETOL.
- Report pregnancies to Esperion Therapeutics, Inc. Adverse Event reporting line at 1-833-377-7633.

See full prescribing information [here](#).

NEXLIZET[®] (bempedoic acid and ezetimibe)

Important Safety Information

- NEXLIZET is indicated:
- The bempedoic acid component of NEXLIZET and NEXLETOL is indicated to reduce the risk of myocardial infarction and coronary revascularization in adults who are unable to take recommended statin therapy (including those not taking a statin) with:
 - established cardiovascular disease (CVD), or
 - at high risk for a CVD event but without established CVD.
- As an adjunct to diet:
 - NEXLIZET, alone or in combination with other LDL-C lowering therapies, to reduce LDL-C in adults with primary hyperlipidemia, including HeFH.
 - NEXLETOL, in combination with other LDL-C lowering therapies, or alone when concomitant LDL-C lowering therapy is not possible, to reduce LDL-C in adults with primary hyperlipidemia, including HeFH.
- NEXLIZET is contraindicated in patients with a prior hypersensitivity to ezetimibe or bempedoic acid or any of the excipients. Serious hypersensitivity reactions, such as anaphylaxis, angioedema, rash, and urticaria have been reported with ezetimibe or bempedoic acid.
- Hyperuricemia: Bempedoic acid, a component of NEXLIZET, may increase blood uric acid levels, which may lead to gout. Hyperuricemia may occur early in treatment and persist throughout treatment, returning to baseline following discontinuation of treatment. Assess uric acid levels periodically as clinically indicated. Monitor for signs and symptoms of hyperuricemia, and initiate treatment with urate-lowering drugs as appropriate.
- Tendon Rupture: Bempedoic acid, a component of NEXLIZET, is associated with an increased risk of tendon rupture or injury. Tendon rupture may occur more frequently in patients over 60 years of age, in those taking corticosteroid or fluoroquinolone drugs, in patients with renal failure, and in patients with previous tendon disorders. Discontinue NEXLIZET at the first sign of tendon rupture. Consider alternative therapy in patients who have a history of tendon disorders or tendon rupture.
- The most common adverse reactions in the primary hyperlipidemia trials of bempedoic acid (a component of NEXLIZET) in $\geq 2\%$ of patients and greater than placebo were upper respiratory tract infection, muscle spasms, hyperuricemia, back pain, abdominal pain or discomfort, bronchitis, pain in extremity, anemia, and elevated liver enzymes.
- Adverse reactions reported in $\geq 2\%$ of patients treated with ezetimibe (a component of NEXLIZET) and at an incidence greater than placebo in clinical trials were upper respiratory tract infection, diarrhea, arthralgia, sinusitis, pain in extremity, fatigue, and influenza.
- In the primary hyperlipidemia trials of NEXLIZET, the most commonly reported adverse reactions (incidence $\geq 3\%$ and greater than placebo) observed with NEXLIZET, but not observed in clinical trials of bempedoic acid or ezetimibe, were urinary tract infection, nasopharyngitis, and constipation.
- The most common adverse reactions in the cardiovascular outcomes trial of bempedoic acid (a component of NEXLIZET) at an incidence of $\geq 2\%$ and 0.5% greater than placebo were hyperuricemia, renal impairment, anemia, elevated liver enzymes, muscle spasms, gout, and cholelithiasis.
- Discontinue NEXLIZET when pregnancy is recognized unless the benefits of therapy outweigh the potential risks to the fetus. Because of the potential for serious adverse reactions in a breast-fed infant, breastfeeding is not recommended during treatment with NEXLIZET.
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