Edgar Filing: Esperion Therapeutics, Inc. - Form 4

Form 4	erapeutics, Inc.										
April 27, 20	_								PPROVAL		
FORM	A 4 UNITED STATE	S SECURITI	ES A	AND EXC	HAN	IGE CO	OMMISSION	OMB	3235-0287		
Check th	nis box	Washing	gton	, D.C. 205	49			Number:	3235-0287 January 31,		
if no lon subject t Section Form 4	16. STATEMENT (S IN CUF	Expires: 2005 Estimated average burden hours per							
Form 4 or Form 5 obligations may continue.response0.5See Instruction 1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19400.5											
(Print or Type Responses)											
	Address of Reporting Person <u>*</u> IN DOV A MD	Symbol						5. Relationship of Reporting Person(s) to Issuer			
(Last)	•	3. Date of Earliest Transaction					(Check all applicable)				
888 7TH A	VENUE, 30TH FLOOR	(Month/Day/Ye 04/23/2015						Director 10% Owner Officer (give title Other (specify w) below)			
	(Street)		Filed(Month/Day/Year) Applicable I _X_Form fi					or Joint/Group Filing(Check e) by One Reporting Person by More than One Reporting			
NEW YORK, NY 10106									1 0		
(City)	(State) (Zip)		Non-l			-	ired, Disposed of,		-		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			sactio	4. Securitie onor Disposed (Instr. 3, 4	d of (Ē and 5)))	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code	v v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
Common Stock	04/23/2015	S		150,000	D	\$ 109.1	1,904,594	Ι	By Aisling Capital II, LP <u>(1)</u>		
Common Stock	04/24/2015	S	V	5,743	D	\$ 108	1,898,851	I	By Aisling Capital II, LP <u>(1)</u>		
Common Stock	04/24/2015	S	V	61,726	D	\$ 106.1	1,837,125	Ι	By Aisling Capital II, LP <u>(1)</u>		

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
GOLDSTEIN DOV A MD 888 7TH AVENUE 30TH FLOOR NEW YORK, NY 10106	X							
Signatures								
/s/ Dov								

Goldstein 04/27/2015

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* 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).

The reportable securities are owned directly by Aisling Capital II, LP ("Aisling"), and held indirectly by Aisling Capital Partners, LP ("Aisling GP"), as general partner of Aisling, and Aisling Capital Partners, LLC ("Aisling Partners"), as general partner of Aisling GP.

(1) Dr. Goldstein is a member of the investment committee of Aisling. Dr. Goldstein disclaims beneficial ownership of these securities and this report is not an admission that he is the beneficial owner of such securities for purposes of Section 16 or for any other purpose, except to the extent of his pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.