## Edgar Filing: Berkowitz Jeffrey - Form 4

Berkowitz J Form 4 May 25, 20	•									
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0	)287
Check th if no lor subject to Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b).	nger 50 16. 50 Filed pur 50 50 50 50 50 50 50 50 50 50	suant to S (a) of the I	Section Public U	<b>SECUI</b> 16(a) of th Itility Hol	RITIES ne Securi ding Cor	TICIAL OV ties Excha npany Act ny Act of 1	Estimated burden hou response	Estimated average burden hours per response 0.5		
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Berkowitz Jeffrey			2. Issuer Name <b>and</b> Ticker or Trading Symbol Esperion Therapeutics, Inc. [ESPR]			5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) C/O ESPERION THERAPEUTICS, INC.			3. Date of Earliest Transaction (Month/Day/Year) 05/23/2018				(Check all applicable) X_ Director 10% Owner Officer (give title Other (specify below) below)			
ANN ARB		4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>					
(City)	(State)	(Zip)	Tak	la I Non I	Domissatissa	Securities A		of on Donoficio	lly Ownod	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect	of l
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	Perso inform requir	ons who res nation cont red to resp	or indirectly. spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

displays number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. I
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Der
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Sec

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 38.32	05/23/2018		A		4,427		<u>(1)</u>	05/23/2028	Common Stock	4,427

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Berkowitz Jeffrey C/O ESPERION THERAPEUTICS, INC. ANN ARBOR, MI 48108	Х						
Signatures							
/s/ Richard B. Bartram, by power of attorney	0:	5/25/2018					
<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).
- (1) The options vest in full on the earlier of (i) May 23, 2019 and (ii) the Issuer's next annual meeting of stockholders following May 23, 2018.

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.

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