GOLDSTEIN DOV A MD

Form 4 June 08, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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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 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * GOLDSTEIN DOV A MD			2. Issuer Name and Ticker or Trading Symbol Esperion Therapeutics, Inc. [ESPR]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	* * * * * * * * * * * * * * * * * * * *					or Kj	(Check all applicable)					
(Last) (First) (Middle) C/O ESPERION THERAPEUTICS INC.			3. Date of Earliest Transaction (Month/Day/Year) 06/06/2018					_X_ Director 10% Owner Officer (give title below) Other (specify below)				
	(Street) 4. If A				f Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
ANN ARBOR, MI 48108								Person				
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, is any (Month/Day/Year)		on Date, if	Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4)			
Common Stock	06/06/2018			Code V M(1)	Amount 5,000	(D)	Price \$ 14.42	5,047	D			
Common Stock	06/06/2018			M <u>(1)</u>	8,000	A	\$ 17.75	13,047	D			
Common Stock	06/06/2018			J <u>(1)</u>	5,000	D	\$0	8,047	D			
Common Stock	06/06/2018			J <u>(1)</u>	8,000	D	\$ 0	47	D			

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 14.42	06/06/2018		M <u>(1)</u>	5,000	05/15/2015	05/15/2024	Common Stock	5,000
Stock Option (right to buy)	\$ 17.75	06/06/2018		M <u>(1)</u>	8,000	06/09/2017	06/09/2026	Common Stock	8,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

GOLDSTEIN DOV A MD C/O ESPERION THERAPEUTICS INC. X ANN ARBOR, MI 48108

Signatures

/s/ Richard B. Bartram, by power of attorney 06/08/2018

**Signature of Reporting Person

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).

Date

(1) The reporting person was formerly a managing partner at Aisling Capital, which is an affiliate of Aisling Capital II, L.P. ("Aisling"). Under the partnership agreement for the Aisling, the reporting person was deemed to hold the stock option and the shares issuable

Reporting Owners 2

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thereunder for the benefit of Aisling. The stock option was exercised at the direction of Aisling and the shares issued upon exercise were delivered to Aisling. The reporting person disclaims beneficial ownership of the stock option and the shares issuable thereunder, 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.