## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Kooij Louise Frederika</u>						2. Issuer Name and Ticker or Trading Symbol New Amsterdam Pharma Co N.V. [ NAMS ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
		L									R		(give title		Other (s						
(Last) (First) (Middle) C/O NEWAMSTERDAM PHARMA COMPANY N.V.							3. Date of Earliest Transaction (Month/Day/Year) 09/27/2024									Chief Accounting Officer					
GOOIMEER 2-35							4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NAARDEN P7 1411 DC															Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)																		
		Tak	le I - No	n-Deriv	ativ	e Se	curit	ies Ac	quired,	Dis	posed o	f, or E	Bene	eficiall	y Owned		,				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						saction 2A. Dec Execut if any (Month			3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr. 5)				Securitie Beneficia Owned F	5. Amount of Securities Seneficially Dwned Following		Direct Indirect It. 4)	7. Nature of Indirect Beneficial Ownership				
										v	Amount		or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Ordinary Shares 09/27/							/2024				45,000	0 .	A	(1)	45,000		D <sup>(2)</sup>				
Ordinary Shares 10/01/						/2024		S		45,000		D	\$15.72	2 0			D				
		•	Гаble II -								osed of, onvertil				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed 4 Date,	I. Fransaction Code (Instr.		5. Number 6		6. Date Exercisab Expiration Date (Month/Day/Year)		able and 7. Tit Amo Secu Unde Deriv		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	N C	Amount or Number of Shares							
Option (right to	(1)	09/27/2024			M			45,000	(3)		07/06/2031	Ordina Share		45,000	\$0.00	168,07	73	D <sup>(2)</sup>			

## **Explanation of Responses:**

- 1. The exercise price of the option is EUR 1.16392.
- 2. The securities were previously held indirectly by the Reporting Person through LouFre Management B.V. ("LouFre") for the benefit of the Reporting Person. The Reporting Person had the sole pecuniary

3. The option was granted on November 22, 2022 to replace an option originally granted on July 6, 2021 which was cancelled in connection with the consummation of NewAmsterdam Pharma Company N.V.'s business combination with Frazier Lifesciences Acquisition Corporation. 60,879 of the shares underlying the option immediately vested on the grant date. 25% of the remaining shares underlying the option vested on January 1, 2021, the one-year anniversary of vesting start date, with the remaining shares vesting in equal monthly installments thereafter for three years, subject to the Reporting Person's continued service through each such date

/s/ Louise Kooij

10/01/2024

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.