PREVAIL Update

May 7, 2026

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Forward-Looking Statements

This presentation and the accompanying oral statements made by NewAmsterdam Pharma Company N.V. ("NewAmsterdam", the "Company" or "we") in connection herewith (collectively, this "Presentation") contains forward-looking statements within the meaning of the U.S. Private Securities Litigation Reform Act of 1995. These statements may be identified by words such as "aims," "anticipates," "believes," "could," "estimates," "expects," "forecasts," "goal," "intends," "may," "plans," "possible," "potential," "seeks," "will," "suggests" and variations of these words or similar expressions, although not all forward-looking statements contain these words. Forward-looking statements in this Presentation include, but are not limited to, statements relating to: the Company's business and strategic plans; the Company's intention to conduct the PREVAIL interim analysis; the Company's expectations regarding the timing of the interim analysis, when the result of the interim analysis may be announced and the potential of PREVAIL to be stopped early for efficacy as a result of the interim analysis; the Company's expectation regarding the timing of the completion of the PREVAIL trial if it is not stopped for efficacy following the interim analysis; the design and predictive ability of clinical trials; the timing and forums for announcing data; the encouraging nature of the observed rate of overall MACE events (blinded) in PREVAIL and the Company's expectations with respect to observed trends; the therapeutic potential of the Company's product candidates; and other statements regarding the Company's future operations, financial performance, financial position, prospects, objectives, strategies and other future events.

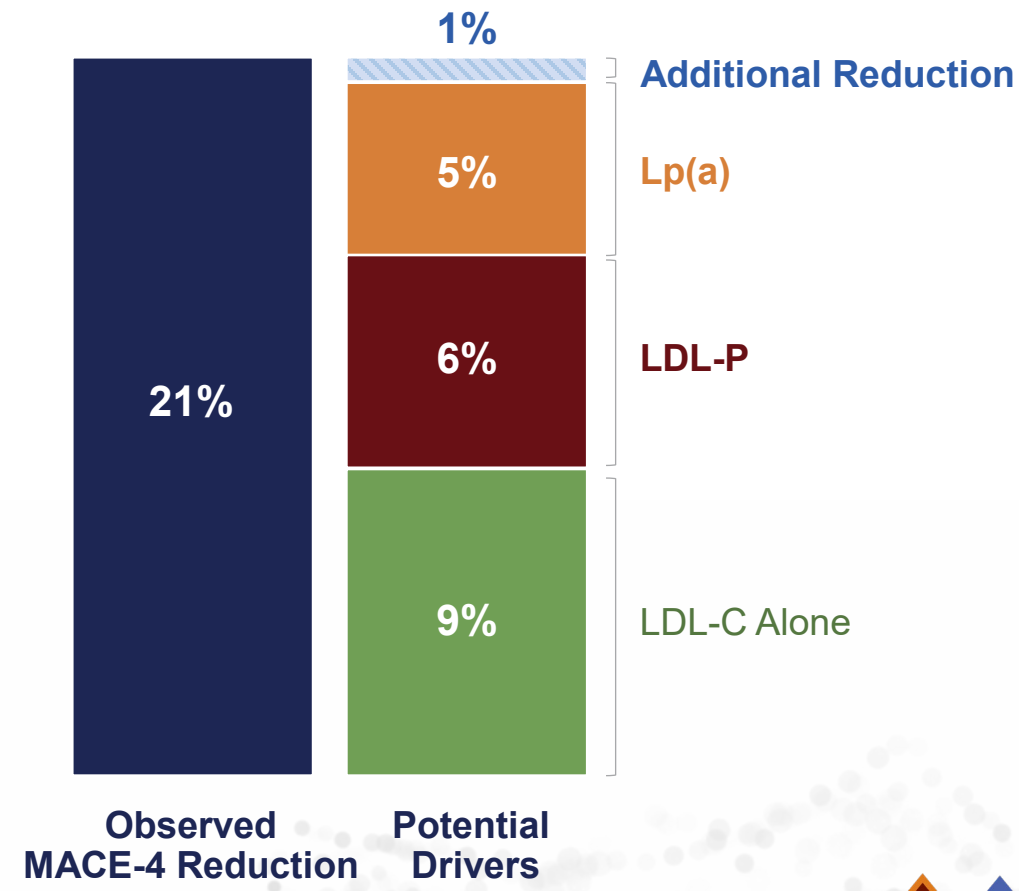
The Company may not actually achieve the plans, intentions or expectations disclosed in these forward-looking statements, and you should not place undue reliance on these forward-looking statements. These forward-looking statements are based upon management's current expectations and assumptions. Actual results or events could differ materially and adversely from the plans, intentions and expectations disclosed in these forward-looking statements as a result of various risks, uncertainties and other factors, including, among others: uncertainties and delays inherent in clinical development of drug products; uncertainties and delays regarding the completion of the Company's clinical trials; uncertainties regarding the reasult of the PREVAIL interim analysis; risk that the favorable trends observed in the blinded data in PREVAIL are not being driven by a treatment effect of obicetrapib; the potential for unknown or unadjudicated events to impact the trends observed in the preliminary blinded data in PREVAIL; uncertainties regarding the outcome of the Company's clinical trials, and whether such outcomes will be adequate to support regulatory review and approval of its product candidates; whether topline, initial or preliminary results, trends or analyses from a particular clinical trial will be predictive of the final results of that trial and whether results of early clinical trials and analyses will be indicative of the results of later clinical trials and analyses, or whether projections regarding clinical outcomes will reflect actual results in future clinical trials or clinical use of the Company's product candidates; the potential for varying interpretation of the results of clinical trials and analyses; risks related to the Company's ability to achieve its business plans, objectives and milestones, including approval of the Company's product candidates and potential commercialization; and other important factors, any of which could cause the Company's actual results to differ from those contained in the forward-looking statements, that are described in greater detail in the sections entitled "Risk Factors" in the Company's Annual Report on Form 10-K filed with the Securities and Exchange Commission ("SEC") on February 18, 2026 and in its most recent Quarterly Report Form 10-Q, as well as in other filings the Company may make with the SEC in the future, which are available at www.sec.gov. Any forward-looking statements contained in this Presentation speak only as of the date of this Presentation, and the Company expressly disclaims any obligation to update any forward-looking statements contained herein, whether because of new information, future events, changed circumstances or otherwise, except as otherwise required by law.

Explaining BROADWAY's Observed 21% MACE-4 Reduction

Methods of Estimating MACE-4 Reduction

- Based on the CTT line, the expectation for a 33% reduction in LDL-C from placebo would be a 9% MACE-4 reduction, after 12 months
- LDL-P reduction potentially provides 6-7% additional MACE-4 reduction
- Lp(a) reduction potentially provides an additional 5% MACE-4 reduction
- These elements may not be additive as they are correlated to some extent. In this scenario, there is room for additional reduction to be driving incremental gains

Obicetrapib's Observed MACE-4 Reduction



Note: Actual results may differ from hypothetical calculation.
Sources: Data on file and Cholesterol Treatment Trialists Collaboration; Folse et al. Athero 2014, Quseda et al, Atherosclerosis 35 (2023) 165-177;
Berman, A, Biery, D, Besser, S. et al. Lipoprotein(a) and Major Adverse Cardiovascular Events in Patients With or Without Baseline Atherosclerotic Cardiovascular Disease. JACC. 2024 Mar, 83 (9) 873–886
MACE-4 includes CHD death, myocardial infarction, ischemic stroke and coronary revascularization in adults.
While not powered to detect a MACE-4 benefit, we observed positive MACE-4 data as part of our review of the exploratory endpoint. BROADWAY was not powered to measure MACE-4 benefit and the MACE-4 data presented below may not be predictive of the MACE data we observe in PREVAIL, which has been designed to measure MACE benefit.

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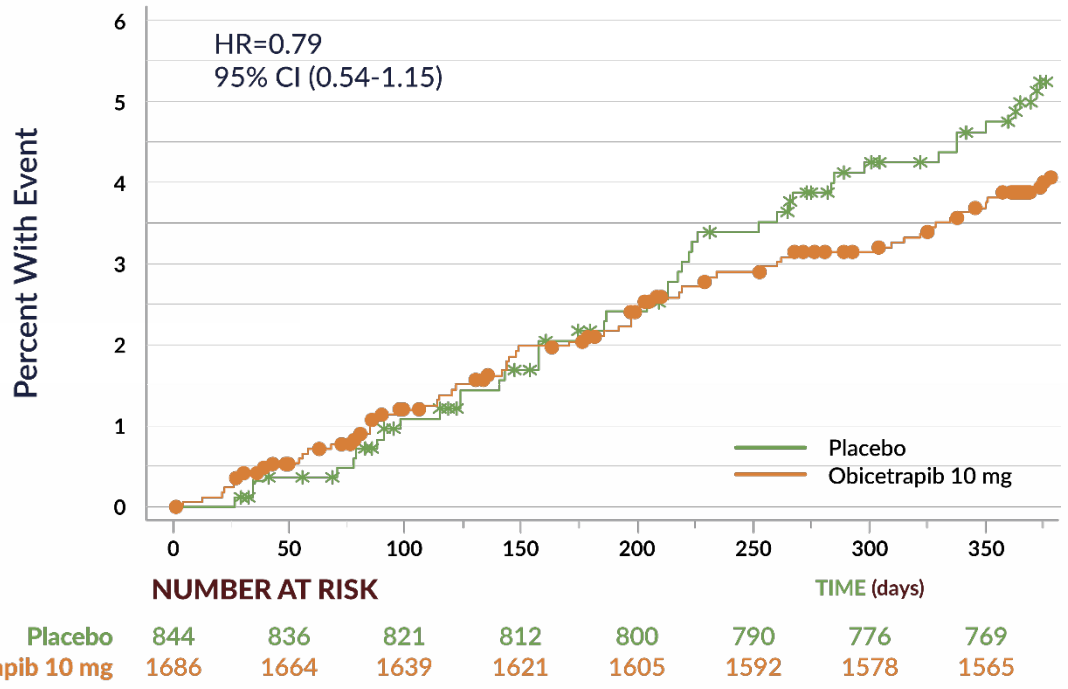
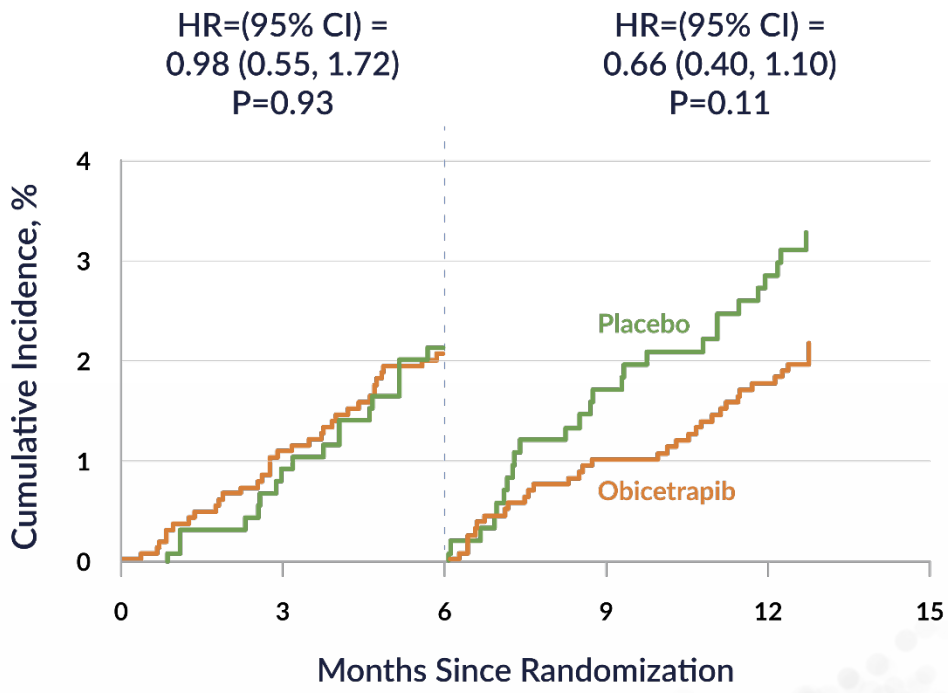
Kaplan-Meier Curve Separates at Day 200 Driven by Attenuation of MACE-4 Events in the Obicetrapib Arm

BROADWAY

Kaplan Meier Curve



Landmark Analysis: Censored at 6 months



4-point MACE: CHD death, Non-fatal myocardial infarction, non-fatal stroke, coronary revascularization
While not powered to detect a MACE-4 benefit, we observed positive MACE-4 data as part of our review of the exploratory endpoint. BROADWAY was not powered to measure MACE-4 benefit and the MACE-4 data presented below may not be predictive of the MACE data we observe in PREVAIL, which has been designed to measure MACE benefit.

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BROADWAY Designed to be a Predictor of PREVAIL

BROADWAY

1º endpoint – week 12

N = 2532

Obicetrapib 10 mg (2:1 randomization)

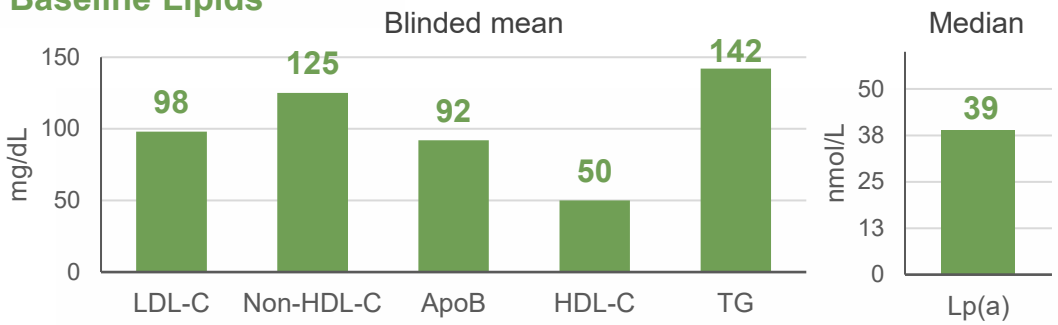
Placebo

13-months

Key Inclusion Criteria

- ASCVD or HeFH
- LDL-C ≥55 mg/dL w/risk factors, or
- LDL-C≥ 100 mg/dL
- Maximally tolerated lipid lowering therapy

Baseline Lipids



Baseline Lipid Modifying Therapy

- Any statin: 91%
- High intensity statin: 65%
- Ezetimibe: 26%
- PCSK9i: 4%
- SGLT2i: 11%
- GLP-1: 6%

PREVAIL

LDL-C endpoint

N = 9541

Obicetrapib 10 mg (1:1 randomization)

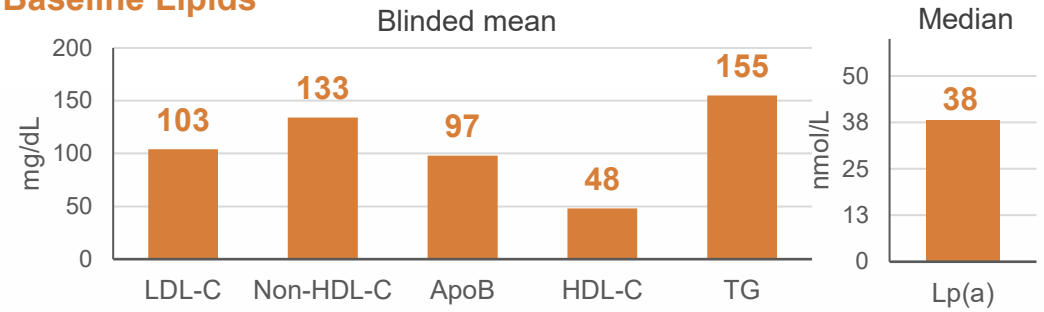
Placebo

54-months

Key Inclusion Criteria

- ASCVD
- LDL-C ≥55 mg/dL w/risk factors, or
- LDL-C≥ 100 mg/dL
- Maximally tolerated lipid lowering therapy

Baseline Lipids



Baseline Lipid Modifying Therapy

- Any statin: >90%
- High intensity statin: 70%
- Ezetimibe: 23%
- PCSK9i: 2%
- SGLT2i: 14%
- GLP-1: 6%

Source: Data on file

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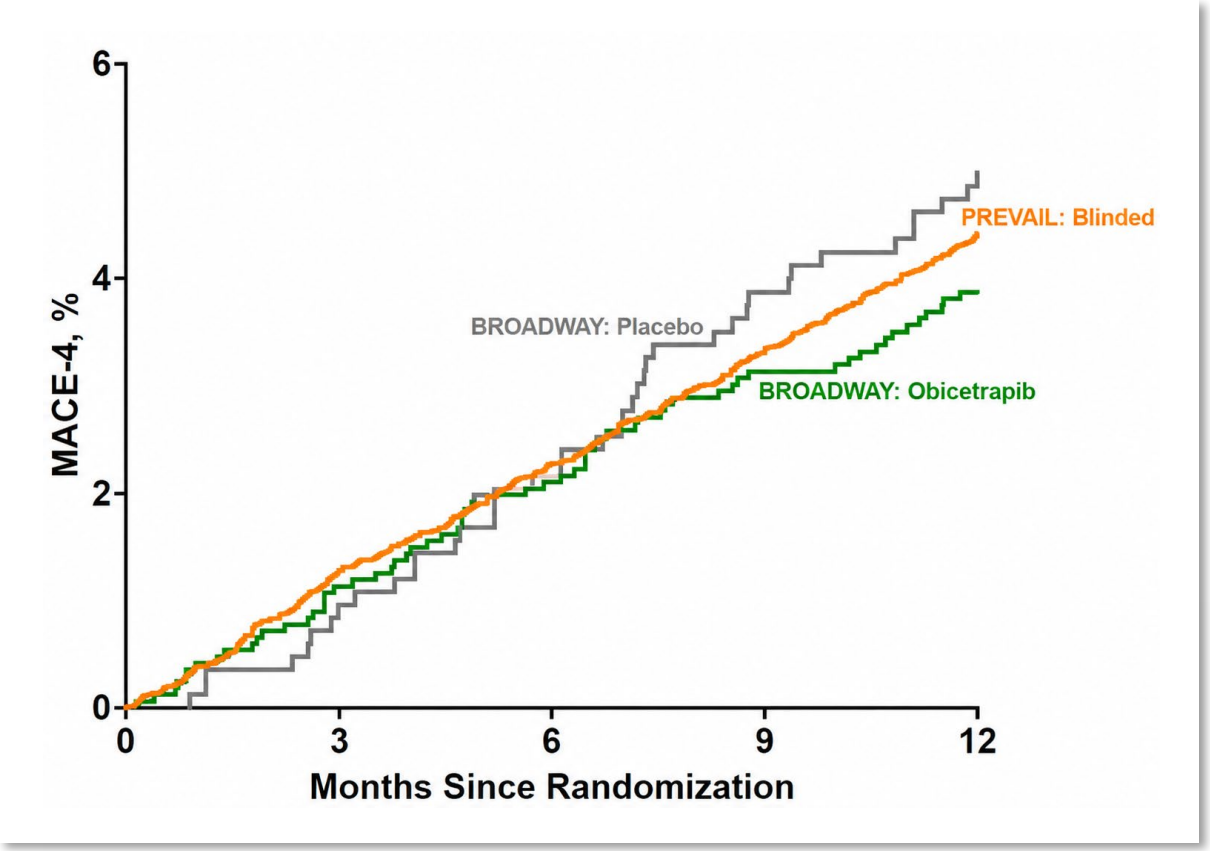
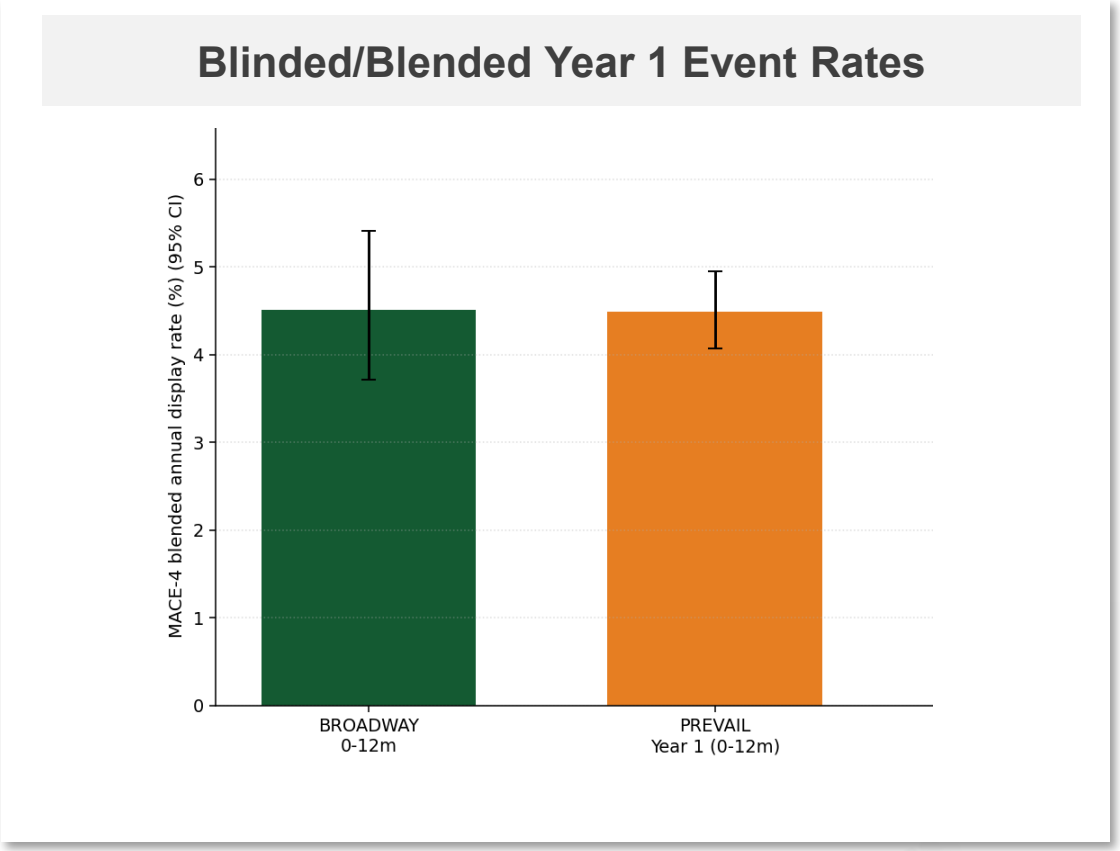
Analysis of BROADWAY and PREVAIL Year 1 Event Rates(1)





4-point MACE: CHD death, Non-fatal myocardial infarction, non-fatal stroke, coronary revascularization

(1) While not powered to detect a MACE benefit, we observed positive MACE-4 data as part of our review of the exploratory endpoint. BROADWAY was not powered to measure MACE benefit and the MACE data presented below may not be predictive of the MACE data we observe in PREVAIL, which has been designed to measure MACE benefit. PREVAIL data is preliminary and subject to change as MACE events continue to be identified and adjudicated (including with respect to periods presented above). Additionally, Year 1 and Year 2 MACE event trends may not be indicative of future trends.

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