FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Num
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	OMB APPROVAL										
- 1											
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	Estimated average burden										
	hours per response.	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Name and Address of Reporting Person* Crowley John F						2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS, INC. [FOLD]								5. Relationship of Re (Check all applicable X Director			g Pers	10% Ov	vner
(Last) 47 HUL	(Last) (First) (Middle) 47 HULFISH STREET						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2024							X Officer (give title below) Other (specify below) Executive Chairman					вреспу
(Street) PRINCETON NJ 08542					4. If	 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person 										on			
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											ended to			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes					ear) E	2A. Deemed Execution Date, if any (Month/Day/Year)		, T	3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (E					5. Amount of Securities Beneficially Owned Foll Reported		ities icially d Following		n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									ode	v /	Amount	(A) or (D)	Price		Transa	action(s) 3 and 4)		Ju. 4)	(111541. 4)
Common Stock 02/01/202					24				S		31,614	D	\$12.618	84(1) 7		750,838		D	
Common Stock 02/01/202					.4			F		21,596	D	\$12.6	.67		729,242		D		
Common Stock															64,895			I	By Trust
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)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any		4. Transi Code 8)	(Instr.			Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv Secu 3 and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. This price is the weighted average price for the transactions reported on this line. The prices for the transactions reported on this line range from \$12.44 to \$12.74 inclusive. The reporting person undertakes to provide, upon request, by the staff of the Securities and Exchange Commission, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

All sale transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 6, 2023.

/s/ Christian Formica, Attorney-in-Fact

02/05/2024

** 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.