FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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Check this box if no longer subject
o Section 16. Form 4 or Form 5
bligations may continue. See
notruotion 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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]										all app		ıg Pei	10% O	wner
(Last) (First) (Middle) C/O AMICUS THERAPEUTICS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 09/15/2023								X	Officer (give title below) Executive		Cha	Other (s below) airman	вреспу		
3675 MARKET STREET				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicatione) X Form filed by One Reporting Person					.	
(Street) PHILADELPHIA PA 19104													Form filed by More than One Reporting Person					orting	
(City)	(City) (State) (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.													
		Table	I - N	lon-Deriva	tive	Secu	rities	Ac	quir	ed, Di	sposed o	f, or	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execution		on Date, C Day/Year) 8				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5) Secu Bene		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v .	Amount	(A) or (D)	Price		Transa	nsaction(s) tr. 3 and 4)		4,	(1115411 4)		
Common	Stock			09/15/202	3				S		6,044	D	\$13.064	3.0648 ⁽¹⁾ 914,009 D				D	
Common	Stock													64,895 I By 7					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)	rative Conversion Date Execution Date, if any		4. Transa Code 8)	(Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired r osed) : 3, 4	Expiration Date			Amo Secu Undo Deriv Secu 3 and	Amount or Number of	nt er		9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	,	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 \$12.93 to \$13.22 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.

All transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 7, 2022. In addition to the reported transactions, Mr. Crowley also has approximately 781,000 options outstanding and exercisable at various strike prices.

> /s/ Christian Formica, Attorney-in-Fact

09/18/2023

** 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.