FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								

0.5

hours per response:

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

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>Crowley John F</u>						2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS INC [FOLD]									Check all a	ector	1	0% O	wner	
(Last) (First) (Middle) C/O AMICUS THERAPEUTICS, INC. 1 CEDAR BROOK DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 11/25/2013									X Officer (give title below) Other (specify below) Chairman & CEO					
(Street) CRANBURY NJ 08512 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Fo	·′				
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally Ow	ned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,		Code (Instr. 5)				nd Sec Ben Owr	nount of irities eficially ed Following	6. Owners Form: Dire (D) or India (I) (Instr. 4)	ct ect	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(,	A) or D)	Price	Tran	orted saction(s) r. 3 and 4)			(Instr. 4)	
Common Stock 11/25/							2013		A		10,000	0 A S		\$2.	08	123,409	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, ity or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		Owner Form: Direct or Indi (I) (Inst	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or	nber						

Explanation of Responses:

Remarks:

/s/ John F. Crowley

11/25/2013

** Signature of Reporting Person D

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

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.

 $^{^{\}star}$ 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).