FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | |
|------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
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| 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

| 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 a | ll applicab Director | ble) | Person(s) to Is | Owner |
|--|--|--|--|-----------------------------------|---------|---|-------|---|--------|---|---|-------|---|--|---|--|--|---|---|
| (Last) (First) (Middle) C/O AMICUS THERAPEUTICS, INC. 1 CEDAR BROOK DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/15/2017 | | | | | | | | | X Officer (give title Other (specification) Chairman & CEO | | | | |
| (Street) CRANBURY NJ 08512 (City) (State) (Zip) | | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | | Code | Transaction Disposed Of (D) (In Code (Instr. 5) | | | | | nd S | . Amount of ecurities eneficially wned Follo | у [| 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | , т | ransaction nstr. 3 and | | | (Instr. 4) | | |
| Common Stock 06/15/ | | | | | | | /2017 | | F | | 5,005 | | D | \$8.79 | | 326,606 | | D | |
| Common Stock | | | | | | | | | | | | | | | 64,89 | 95 | 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) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | Transaction Code (Instr. 8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date Date Expiration Date Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | 8. Prica Deriva Securi (Instr. | tive deriv ty Seconds 5) Bendown Follo Repondran | Number of ivative curities neficially med lowing ported insaction(s | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

Remarks:

<u>/s/ John F. Crowley</u>

06/19/2017

** Signature of Reporting Person 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.

^{*} 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).