SEC For	m 4 FORM	4	UNIT	ED STA	TES	S SE		IES /	AND	ЕХСНА	NGE	сом	MIS	SION				
						Washington, D.C. 20549									OMB APPROVAL			VAL
Section 16. Form 4 or Form 5 obligations may continue. See				ed purs	NT OF CHANGES IN BENEFICIAL OWNER I pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								ΗP	Estima	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person* Crowley John F					2. Issuer Name and Ticker or Trading Symbol <u>AMICUS THERAPEUTICS, INC.</u> [FOLD]								k all applic: Directo	able) r	, 10% Owr			
	(Last) (First) (Middle) C/O AMICUS THERAPEUTICS, INC. 1 CEDAR BROOK DRIVE													Officer below)	cer (give title Other (specify ow) below) Chairman & CEO			
(Street) CRANBURY NJ 08512				- 4. i	Line) X Forr Forr							Form fi	Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting					
(City)	(City) (State) (Zip)																	
		Tab	le I - N	lon-Deriv	/ative	e Sec	urities A	cquir	ed, D	isposed c	of, or B	enefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution		Code	action (Instr.	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			nd 5) Securiti Benefic		es ally 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		Transact (Instr. 3	tion(s)			(1150.4)
Common Stock				10/01/2020				М		20,000	A	\$5.	.96	870	870,813		D	
Common Stock 1			10/01/2020				S ⁽¹⁾		29,900) D \$14.0		169 ⁽²⁾	840	0,913		D		
Common	Stock													64	,895		I	By Trust
		-	Table I							sposed of , converti				Dwned				
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transa Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5)	Expi (Mor	ate Exer ration E nth/Day		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		rity (3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)		

 Stock Options (right to buy)
 \$5.96
 10/01/2020
 M
 Image: 20,000
 (3)
 01/19/2021
 Common Stock
 20,000
 \$0.00

٧

Code

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

2. 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 \$13.86 to \$14.32 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.

Date

Exercisable

(D)

(A)

Expiration

Title

Date

3. All of these options were fully vested and exercisable as of October 1, 2020.

Remarks:

In addition to the reported transactions, Mr. Crowley also has approximately 1.51 million options outstanding and exercisable at various strike prices.

<u>/s/ Christian Formica, Attorney-</u>	10/05/2020
<u>in-Fact</u>	10/05/2020
** Signature of Reporting Person	Date

or Number

Shares

23,975

D

of

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.