FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

Washington, D	D.C. 20549
---------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS, INC. [FOLD]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Campb</u>	<u>npbell Bradley L</u>					TIMICOS TILENAI EUTICS, INC. [FOLD]								Directo	or	10% Owner			
(Last)	(Fi	rst) ((Middle))									Other (s below)	pecify					
C/O AMICUS THERAPEUTICS, INC.				12/2	12/22/2021							Chief Operating Officer							
3675 MARKET STREET																			
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street)												Line) X	Form filed by One Reporting Person						
PHILADELPHIA PA 19104												21	Form filed by More than One Reporting						
(City)	(S	tate) ((Zip)			Person													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			/Year)	Execution D				4. Securities Disposed Of			5)	Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following		Direct of Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Price		Reported (Ins Transaction(s) (Inst. 3 and 4)				msu. 4)	
Common	Stock			12/22/2	021			М		3,000	A	\$4.	38	460,268 D					
Common	Stock			12/22/2	021			S ⁽¹⁾		3,000	D	\$11.69	985 ⁽²⁾	35 ⁽²⁾ 457,268 D					
		Т	able I							sposed of, , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any (Month/Day/Year) irvative		tion Date,		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5) 8. Price of derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)		ly [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

\$4.38

- $1. The sales \ reported \ on \ this \ Form \ 4 \ were \ made \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person.$
- 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 \$11.49 to \$11.93 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

(3)

(D)

3.000

(A)

3. All of the options were fully vested and exercisable as of the transaction date.

12/22/2021

Remarks:

Stock Options

(right to

/s/ Christian Formica, Attorney-in-Fact

12/23/2021

Date

0

D

** Signature of Reporting Person

Amount or Number

of Shares

3,000

\$0.00

Title

Stock

06/04/2022

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).

Code

М

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.