Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEM
	SIAILM
Section 16. Form 4 or Form 5	
obligations may continue. See	

IENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person* <u>Baird William D III</u>						2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS INC [FOLD]									all applic	r 10% Owner			ner
(Last) 1 CEDA	(F R BROOK	,	(Middle)	1		Date of /12/20		iest Trar	saction	(Mont	th/Day/Year)		X	below)	(give title hief Finar	ıcial	below)	респу	
(Street) CRANB	RANBURY NJ 08512					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - I	Non-Deri	ivativ	e Sec	curit	ties Ad	cquire	d, D	isposed o	f, or B	enefic	ially (Owned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date		ecution Date, ny		tion nstr.				Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	ction(s)		((Instr. 4)	
Common Stock 10/12/202						17			M ⁽¹⁾		40,000	A	\$14.25	533 ⁽²⁾	135,121			D	
Common Stock 10/12/20				2017	17			S ⁽¹⁾		40,000	D	\$14.25	533 ⁽³⁾	95,121			D		
		٦	Table								posed of, , convertil				wned				•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)		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 Security (Instr. 3 and 4)		Do	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amou or Numb of Share	oer					
Stock Options (right to	\$2.52	10/12/2017			M ⁽¹⁾			40,000	06/18/	2017	06/18/2023	Common Stock	40,0	00	\$0.00	6,224		D	

Explanation of Responses:

- 1. The exercise of stock options and subsequent sale of common stock were made pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 9, 2017.
- 2. This price is the weighted average purchase price for the transactions reported on this line. The prices for the transactions reported on this line range from \$14.08 to \$14.44. 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 purchased at each separate price.
- 3. This price is the weighted average sale price for the transactions reported on this line. The prices for the transactions reported on this line range from \$14.08 to \$14.44. 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.

Remarks:

/s/ William D. Baird, III

10/16/2017

** 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.