FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
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).

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1. Name and Address of Reporting Person* SBLENDORIO GLENN						2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS, INC. [FOLD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023									Officer below)	(give title		10% Ov Other (s below)		
C/O AMICUS THERAPEUTICS, INC. 3675 MARKET STREET					4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) PHILADELPHIA PA 19104				_										Form filed by More than One Reporting Person						
(City) (State) (Zip)					la.	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - No	n-Deriv	/ative	Sec	curit	ies Ac	quired,	Disp	osed c	of, or Be	nefi	cially	Owned	t				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ay/Year) if an		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4				es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) c (D)	or P	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock 05/18/				3/2023				М		15,00	00 A		\$3.32	86	86,719		D			
		Т							uired, D s, option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ow For Oir Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Shar	nber						
Stock Options (right to	\$3.32	05/18/2023			M			15,000	(1)	00	6/13/2023	Common Stock	15,0	000	\$0.00	0		D		

Explanation of Responses:

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

Remarks:

Christian Formica, Attorney-

05/19/2023

in-Fact

** 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.