# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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

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

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* | 2. Issuer Name and Ticker or Trading Symbol<br>AMICUS THERAPEUTICS, INC. [FOLD | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                                   |                       |  |  |
|--|--|---|-----------------------------------|-----------------------|--|--|
| <u>Crowley John F</u>                    |  | X   | Director                          | 10% Owner             |  |  |
| (Last) (First) (Middle)                  | 1  | x   | Officer (give title below)        | Other (specify below) |  |  |
| C/O AMICUS THERAPEUTICS, INC.            | 3. Date of Earliest Transaction (Month/Day/Year)<br>05/23/2022                 |   | Chairman & O                      | CEO                   |  |  |
| 3675 MARKET STREET                       |  | O In alter  |                                   |                       |  |  |
| (Street)                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)                       | Line)   | idual or Joint/Group Filing       | д (Спеск Арріїсаріе   |  |  |
| PHILADELPHIA PA 19104                    |  | X   | Form filed by One Repo            | orting Person         |  |  |
|  |  |   | Form filed by More thar<br>Person | n One Reporting       |  |  |
| (City) (State) (Zip)                     |  |   |                                   |                       |  |  |

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transa<br>Code (<br>8) |   |        |               |                                 | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following        | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|---------------------------------|--|---|------------------------------|---|--------|---------------|---------------------------------|--|---|---|
|                                 |  |   | Code                         | v | Amount | (A) or<br>(D) | Price                           | <ul> <li>Reported<br/>Transaction(s)<br/>(Instr. 3 and 4)</li> </ul> |   | (Instr. 4)  |
| Common Stock                    | 05/23/2022                                 |   | <b>S</b> <sup>(1)</sup>      |   | 21,814 | D             | <b>\$</b> 8.0025 <sup>(2)</sup> | 944,153  | D   |   |
| Common Stock                    |  |   |                              |   |        |               |                                 | 64,895   | Ι   | By Trust  |

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|   |   |  | ( 0 / 1   | •                            |   |     |     | • •  |   |       |   | ,  |  |  |  |
|---|---|--|---|------------------------------|---|-----|-----|--|---|-------|---|--|--|--|--|
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | of  |     | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>3 and 4) |       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |  |   | Code                         | v | (A) | (D) | Date<br>Exercisable                            | Expiration<br>Date  | Title | Amount<br>or<br>Number<br>of<br>Shares              |  |  |  |  |

#### 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 \$8.00 to \$8.02 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.

#### Remarks:

In addition to the reported transactions, Mr. Crowley also has approximately 482,000 options outstanding and exercisable at various strike prices.

/s/ Christian Formica, Attorney-in-Fact

05/25/2022

\*\* 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.