FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES II	N 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*  Peist Kenneth  (Last) (First) (Middle)  1 CEDAR BROOK DRIVE					<u>A</u> ]	2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS INC [ FOLD ]  3. Date of Earliest Transaction (Month/Day/Year) 03/20/2015								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  VP, Legal & IP					
(Street) CRANB (City)		tate)	08512 (Zip)		-	4. If Amendment, Date of					`		Li	Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
4 Tidl51	0		le I - N						•	d, Di				ally Owner		l c o	nership	7. Nature	
'''' '''		2. Transaction Date (Month/Day/Year		Execution Date,		3. Transaction Code (Instr.					5) Securiti Benefic	Amount of curities neficially vned Following		: Direct	of Indirect Beneficial Ownership				
					(months bay, real)		Code	v	Amount	(A) or (D)	Price	Reporte Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common stock 03			03/20/2	2015	015					10,000	A	\$11.51	6(2) 60	60,000		D			
Common stock 03/20/2			2015	)15			S <sup>(1)</sup>		10,000	D	\$11.51	6 <sup>(3)</sup> 50,000			D				
		Т	able II	- Deriva (e.g., p	ative s	Secu calls	ritie , wa	s Acq rrants	uired,	Dis ons,	posed of converti	, or Ben ble secu	eficiall urities)	y Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversior or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	if any		4. Transa	ransaction		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh S Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Stock Options (right to buy)	\$3.53	03/20/2015			M <sup>(1)</sup>			2,500	01/28/2	014	01/28/2023	Common Stock	2,500	\$0.00	18,647	7	D		
Stock Options (right to buy)	\$2.52	03/20/2015			M <sup>(1)</sup>			2,500	06/18/2	014	06/18/2023	Common stock	2,500	\$0.00	22,292	2	D		
Stock			ĺ							$\overline{}$						$\overline{}$			

## **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 December 17, 2014.
- 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 \$11.17 to \$11.95. 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 \$11.17 to \$11.95. 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:

buy)

/s/ Kenneth Peist

\*\* Signature of Reporting Person

03/24/2015

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Date

\* 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.