FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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

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1. Name and Address of Reporting Person*  RAAB MICHAEL					2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS, INC. [ FOLD ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)					
KAAB MICHAEL				X Direct									or		10% Ov	vner		
(Last)	,	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/02/2022								Office below	r (give title )	Other (sp below)		specify
3675 MARKET STREET				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													[""	,	filed by One	. Pane	ortina Dereo	,
PHILADELPHIA PA 19104													X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date,		n Date,	3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				Benefic Owned	es Forr ially (D) ( Following (I) (II		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 05/02/2			2022	)22		M		15,000	A	<b>\$4.79</b>	51	,749		D				
Common Stock 05/02/20			2022	022		<b>S</b> <sup>(1)</sup>		15,000	D	\$6.9927	(2) 36	5,749		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)  2. Conversion Date (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution (Month/Day/Year) Date (Month/Day/Year) (Month/It							6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares					
Stock Options (right to buy)	\$4.79	05/02/2022			М			15,000	(3)		06/13/2022	Common Stock	15,000	\$0.00	0		D	

## **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 \$6.83 to \$7.18 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.
- 3. All of the options were fully vested and exercisable as of the transaction date.

## Remarks:

Christian Formica, Attorney-in-05/04/2022 **Fact** 

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.