FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-0287								
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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).

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 AMICUS THERAPEUTICS INC [FOLD]								(Check all app		cable)		ssuer Owner (specify		
(Last) (First) (Middle) C/O AMICUS THERAPEUTICS, INC. 6 CEDAR BROOK DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 11/03/2008										below)) "	below ncial Officer	
(Street) CRANBURY NJ 08512 (City) (State) (Zip)					4. If	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 Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,					ies Acquired (A) Of (D) (Instr. 3, 4		l and Secur Benef Owne		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount		(A) or (D)	Price	. т	Reporte ransac Instr. 3	tion(s)		(Instr. 4)	
Common Stock 11/03/					/2008				F 220 ⁽¹⁾			D \$10.45		.45	.45 34,495		D		
		Та									sed of, onvertib				y Owi	ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable Expiration Date (Month/Day/Year)		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Pric Deriva Securi (Instr.	tive c ty 5 5) E F		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(A) (D) E			Expiration Date	Title	or Nui of	nber						

Explanation of Responses:

1. In order to comply with the minimum statutory federal tax withholding rate of 25% plus 1.45% for Medicare, the reporting person surrendered a portion of the vested shares, representing 26.45% of the total value of the shares then vested, to the issuer in connection with its withholding obligations. The restricted stock award to which this disclosure applies vests in a series of monthly installments as outlined in the stock award agreement previously filed on 4/27/2007.

Remarks:

/s/ John McAdam, Attorney-in-

<u>Fact</u>

** Signature of Reporting Person

Date

11/04/2008

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.