Lockhart David J Form 4 June 06, 2012

## FORM 4

### **OMB APPROVAL**

Expires:

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

**OMB** 3235-0287 Number:

January 31,

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2005 Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction

(Print or Type Responses)

1(b).

(Last)

Security

(Instr. 3)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

**SECURITIES** 

1. Name and Address of Reporting Person \* Lockhart David J

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

AMICUS THERAPEUTICS INC [FOLD]

(Check all applicable)

(First) C/O AMICUS THERAPEUTICS.

(Street)

(Middle)

(Month/Day/Year) 06/04/2012

Director 10% Owner X\_ Officer (give title Other (specify below)

Chief Scientific Officer

INC., 1 CEDAR BROOK DRIVE

4. If Amendment, Date Original

3. Date of Earliest Transaction

6. Individual or Joint/Group Filing(Check

(Instr. 4)

Filed(Month/Day/Year)

Code

(Instr. 8)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

CRANBURY, NJ 08512

(City) (State) (Zip) 1. Title of 2. Transaction Date 2A. Deemed

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or

Disposed of (D)

(Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership

Following (A) or (Instr. 3 and 4)

Reported Transaction(s)

Code V Amount (D) Price

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

(Month/Day/Year)

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 control number.

SEC 1474 (9-02)

(Instr. 4)

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

3. Transaction Date 3A. Deemed 1. Title of (Month/Day/Year) Execution Date, if Derivative Conversion

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date** 

7. Title and Amount of 8 Underlying Securities

#### Edgar Filing: Lockhart David J - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed (D) (Instr. 3, 4, and 5)		ed (A) oosed of	(Month/Day/Year)		(Instr. 3 and 4)	
				Code '	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (right to buy)	\$ 4.38	06/04/2012		A	80,00	0	<u>(1)</u>	06/04/2022	Common Stock	80,000

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Lockhart David J C/O AMICUS THERAPEUTICS, INC. 1 CEDAR BROOK DRIVE CRANBURY, NJ 08512

Chief Scientific Officer

### **Signatures**

/s/ David J. 06/06/2012 Lockhart

\*\*Signature of Date
Reporting Person

# **Explanation of Responses:**

- \* 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).

These options vest and become exercisable in a series of installments. The first installment, which consists of 25% of the total aggregate number of options granted, vests on June 4, 2013. The remaining options vest and become exercisable in a series of thirty-five equal monthly installments, beginning on July 1, 2013, with a final installment vesting on June 4, 2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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