Baird William D III Form 4 July 05, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

Number:

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Check this box

if no longer

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 See Instruction

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person \* Baird William D III

2. Issuer Name and Ticker or Trading

Symbol

AMICUS THERAPEUTICS INC

5. Relationship of Reporting Person(s) to

Issuer

[FOLD] (First) (Middle) 3. Date of Earliest Transaction

> (Month/Day/Year) 07/02/2018

Director 10% Owner

(Check all applicable)

Other (specify X\_ Officer (give title below) Chief Financial Officer

1 CEDAR BROOK DRIVE,, C/O AMICUS THERAPEUTICS, INC.

(Street)

(State)

(Zip)

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

CRANBURY, NJ 08512

(City)	(State)	(Zip) Tak	ole I - Non-	Derivative Secu	rities Acquii	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities A oner Disposed of (Instr. 3, 4 and (A) or Amount (D)	(D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	07/02/2018		M	10,000 A	\$ 2.45	117,622	D	
Common Stock	07/02/2018		S <u>(1)</u>	10,000 D	\$ 15.6292 (2)	107,622	D	

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

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# 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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		(
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options (right to buy)	\$ 2.45	07/02/2018		M		10,000	(3)	01/03/2024	Common Stock	10,000	

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Baird William D III 1 CEDAR BROOK DRIVE, C/O AMICUS THERAPEUTICS, INC. CRANBURY, NJ 08512

Chief Financial Officer

## **Signatures**

/s/William D. 07/05/2018 Baird, III

\*\*Signature of Reporting Date

### **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).
- (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 August 9, 2017.
- 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 \$15.45 to \$15.91. 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 April 2, 2018

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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