FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |

0.5

hours per response:

| 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

|  |  |  |  |       | 01 .                            | Secur   | JII 30(II) I | or tire      | invesimen                               | COII   | ipally Act             | 01 1340  |                 |  |   |   |                                     |  |  |  |  |
|--|--|--|--|-------|---------------------------------|---|--------------|--------------|---|--|------------------------|--|-----------------|--|---|---|-------------------------------------|--|--|--|--|
| 1. Name and Address of Reporting Person*  High Katherine A                       |  |  |  |       |                                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol INCYTE CORP [ INCY ] |              |              |   |  |                        |  |                 |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |                                     |  |  |  |  |
| <u>nigii Kalileriile A</u>   |  |  |  |       |                                 |   |              |              |   |  |                        |  |                 |  | X Director  |   |                                     | 10% O  | vner   |  |  |
| (Last) (First) (Middle) 1801 AUGUSTINE CUTOFF                                    |  |  |  |       |                                 | 3. Date of Earliest Transaction (Month/Day/Year) 03/26/2020             |              |              |   |  |                        |  |                 |  | Officer<br>below)   | (give title   |                                     | Other (:<br>below)   | specify  |  |  |
|  |  | 4. 11                                      | 4. If Amendment, Date of Original Filed (Month/Day/Year) |       |                                 |   |              |              |   |  |                        | 6. Individual or Joint/Group Filing (Check Applicable  |                 |  |   |   |                                     |  |  |  |  |
| (Street) WILMINGTON DE 19803   |  |  |  |       |                                 | T. IT A TOTAL COLOR OF OTIGINAL FIRE (MOTHER DOLY TEAT)                 |              |              |   |  |                        |  |                 |  | Line)  X Form filed by One Reporting Person                             |   |                                     |  |  |  |  |
|  |  |  |  |       |                                 |   |              |              |   |  |                        |  |                 |  |   | Form filed by More than One Reporting<br>Person   |                                     |  |  |  |  |
| (City)   | (S   | tate) (                                    | (Zip)  |       |                                 |   |              |              |   |  |                        |  | reisoi          | '  |   |   |                                     |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |  |  |       |                                 |   |              |              |   |  |                        |  |                 |  |   |   |                                     |  |  |  |  |
| 1. Title of Security (Instr. 3) 2. Transac<br>Date<br>(Month/Da                  |  |  |  |       |                                 | Execution Date  |              | Code (Instr. |   | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) |                        |  |                 | 5. Amou<br>Securitie<br>Benefici<br>Owned F<br>Reporte | es Formially (D) (Following (I) (I                                      |   | n: Direct<br>r Indirect<br>istr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |  |  |  |
|  |  |  |  |       |                                 |   |              |              | Code                                    | v  | Amount                 | (A) or<br>(D)  |                 | Price  | Transac<br>(Instr. 3  | ion(s)  |                                     |  | (111501.4)   |  |  |
| Common Stock 03/26/  |  |  |  |       | 5/2020                          | 2020  |              |              | A                                       |  | 139 <sup>(1)</sup> A S |  | \$0.00          | 1  | 139   |   | D                                   |  |  |  |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |       |                                 |   |              |              |   |  |                        |  |                 |  |   |   |                                     |  |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da            | Date, | 4.<br>Transactio<br>Code (Insti |   |              |              | 6. Date Exe<br>Expiration<br>(Month/Day | Date   |                        | and 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Secu<br>(Instr. 3 and 4) |                 | urity  | B. Price of<br>Derivative<br>Gecurity<br>Instr. 5)                      | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | ly                                  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |  |  |  |       | Code                            | v   | (A)          | (D)          | Date<br>Exercisabl                      |  | xpiration<br>ate       | Title  | or<br>Nur<br>of | mber<br>ares   |   |   |                                     |  |  |  |  |
| Non-<br>Qualified<br>Stock   | \$73.05  | 03/26/2020                                 |  |       | A                               |   | 1,285        |              | (2)                                     | 0  | 3/25/2030              | Commoi<br>Stock  | 1,2             | 285  | \$0.00  | 1,285   |                                     | D  |  |  |  |

## Explanation of Responses:

- 1. This award of restricted stock units ("RSUs") vests in full on the first anniversary of the date of grant or, if earlier, the date of the next regular annual meeting of the Company's stockholders or upon a change of control (as defined in the Amended and Restated 2010 Stock Incentive Plan). The RSUs may be settled only for shares of common stock on a one-for-one basis.
- 2. This option vests in full on the first anniversary of the date of grant or, if earlier, the date of the next regular annual meeting of the Company's stockholders or upon change of control (as defined in the Amended and Restated 2010 Stock Incentive Plan).

## Remarks:

/s/ Michael J. Purvis, Attorney-In-Fact 03/30/2020

\*\* Signature of Reporting Person Date

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.