FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* TISCH DANIEL R						2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]								5. Relationsh Check all ap Dire	plicable)		10% (ssuer Owner (specify
(Last) (First) (Middle) C/O TISCH FAMILY INTERESTS 667 MADISON AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 08/12/2004								below) No longer 10% owner.				
(Street) NEW YORK NY 10021 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) 08/13/2004								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Oity)				on-Deriv	ative	Sec	uritie	s Ac	auirea	d. Di	sposed o	f. or E	Benefic	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.					tion	2A. I Exec if an	Deemed cution I	eemed ition Date,		ction Instr.	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5)		ed (A) or	5. Amou Securiti Benefic Owned	int of es ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock ⁽¹⁾ 08/12/20					2004	04		P		255,750(2	2) A	\$5.	.5 1,216,661.25		I		See Footnote ⁽³⁾	
Common Stock														11	7,592		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)		Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Derivative		4. Transa Code (1 8)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Exercisable			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly C	0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. Because of certain family relationships with other shareholders of the Issuer, the Reporting Person is filing solely for informational purposes as if he were a member of a group with such shareholders. However, the Reporting Person disclaims that he and any other person or persons in fact constitute a "group" for purposes of Section 13(d)(3) of the Securities Exchange Act of 1934, as amended, or Rule 13d-5 thereunder or that he is the beneficial owner of, or has a pecuniary interest in, any securities owned by any other person.
- 2. Includes one quarter of a total of 1,023,000 shares purchased by a partnership in which the Reporting Person has a one quarter interest.
- 3. Includes 272,033 shares owned by trusts of which the Reporting Person is a trustee and beneficiary and one quarter of a total of 3,778,513 shares owned by a partnership in which the Reporting Person has a one quarter interest

08/13/2004 /s/ Daniel R. Tisch

** 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.