FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB API	OMB APPROVAL									
OMB Number:	3235-0287									
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hours per respons	e 0.5									

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Morrissey Michael James						2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]							(Ched	k all app Direc	nship of Reporting Po I applicable) Director Officer (give title		Person(s) to Issuer 10% Owner Other (specify		
(Last) 1801 AU	(Fii GUSTINE	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/15/2021								X	below	<i>(</i>)	below) Tech. Operation		
(Street) WILMIN (City)	NGTON DE		9803 Zip)		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Charles) X Form filed by One Reporting Form filed by More than On Person									orting Perso	on			
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	Benef	iciall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		Oate,	Transaction Code (Instr.					4 and Sec Ben Owr		cially Following	Form: Direct		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)		rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 01/1.				01/15/2	021				A		11,522(1)	A	. ;	\$0.00	59,943			D	
Common Stock 01/15/2					2021)21		A		5,761(2)	A	. ;	\$0.00	65,704			D		
Common Stock 01/19/2				021		F		174(3)	D	\$	93.96	65,530 ⁽⁴⁾			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 Price of Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Code (Instr. 8) C				of Deriv	r osed) r. 3, 4	6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Amou or Numb of Title Share		er					

Explanation of Responses:

- 1. Represents award of restricted stock units ("RSUs") that will vest 100% on the fourth anniversary of the grant date of January 15, 2021, subject to Michael Morrissey's continued service with the Issuer through the applicable vesting date. The RSUs may be settled only for shares of common stock on a one-for-one basis.
- 2. Represents award of restricted stock units ("RSUs") that will vest 25% annually over four years, subject to Mr. Morrissey's continued service with the Issuer through the applicable vesting dates. The RSUs may be settled only for shares of common stock on a one-for-one basis.
- 3. Represents shares withheld automatically by the Issuer to satisfy tax withholding obligations due at settlement of restricted stock units previously reported in Table I as common stock.
- 4. Including the January 15, 2021 Restricted Stock Unit Grants, this includes an aggregate of 27,686 shares of common stock issuable pursuant to previously reported restricted stock units that have not vested.

Remarks:

/s/ Michael Morrissey

01/20/2021

** 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.