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: 3235-0287							
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

Name and Address of Reporting Person* Stein Steven H						2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]									k all app Direc	blicable) ctor		Owner	
(Last) (First) (Middle) 1801 AUGUSTINE CUT-OFF						3. Date of Earliest Transaction (Month/Day/Year) 02/14/2019									belov	,	below Medical Offic	′ I	
(Street) WILMIN (City)	GTON D		.9803 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line)	Form Form	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,			3. 4. Securit Disposed Code (Instr. 8)					Securi Benefi	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	Code V Amount		(A) or (D) Prio		Price	Transa	action(s) 3 and 4)		(111511.4)	
Common Stock 02/1					/2019		A		5,389(1)	A \$0.00		0 19,162 ⁽²⁾		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) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

1. Represents shares of common stock underlying performance shares earned upon the achievement of performance criteria determined to be satisfied on February 14, 2019. The performance shares vest 25% annually over four years from the grant date of July 2, 2018, subject to the Reporting Person's continued service with the Issuer through the applicable vesting dates. Each performance share initially represented the right to receive one or more shares of common stock based on, and subject to, the achievement of revenue-based performance criteria determined by the Issuer's Compensation Committee in February 2018 as set forth in the Performance Share Award Agreement. The number of shares of common stock that the Reporting Person was entitled to receive ranged from 0% to 150% of the number of performance shares awarded, and the performance criteria was achieved at the 83% level.

2. Includes an aggregate of 5,416 shares of common stock issuable pursuant to the performance shares reported above and previously reported restricted stock units that have not vested as of February 14, 2019.

Remarks:

/s/ Maria Pasquale, Attorney-In-Fact 02/19/2019

** 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.