FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasnington, D.C. 20040

OMB	APP	ROVA	L

hours per response:

OMB Number: 3235-0287 Estimated average burden

0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

14159 capital (GP), LLC

(First)

667 MADISON AVENUE, 17TH FLOOR

(Middle)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Section	n 30(h) of	the Ir	nvest	tment (Company Act	of 1940									
1. Name and Address of Reporting Person* 14159 capital (GP), LLC					2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
(Last)	(Firs	st) (! NUE, 17TH FLC	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/17/2008							Officer (give title Other (specify below) below)								
(Street) NEW YOL						4. If Amendment, Date of Original Filed (Month/Day/Year) 12/19/2008									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(Sta	te) (Z	Zip)												Person						
		Tab	le I - 1	Non-Deriv	vative	Sec	urities	Acq	uire	ed, D	isposed o	f, or B	enefic	ciall	y Owned						
1. Title of Se	curity (Instr.	3)		2. Transact Date (Month/Day		Execution Date,		, Ţ	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficially Owned Following		ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Natu Indired Benefi Owner	ct icial rship	
								c	ode	v	Amount	(A) or (D)	Price		Reported Transaction(s (Instr. 3 and 4	s) -)			(Instr. 4)		
Common S	tock ⁽¹⁾⁽²⁾			12/17/2	800	08			P		254	A	\$3.1	15	159,511	1 I		Through Partnership ⁰		_	
Common S	tock ⁽¹⁾⁽²⁾			12/17/2	800	08			P		2,191	A	\$3.33	342	161,702		I		hrough Partnership ⁽³⁾		
Common S	tock ⁽¹⁾⁽²⁾			12/17/2	800				P		3,616	A	\$3.33	318	165,318		I		hrough Partnership ⁽³⁾		
Common S	tock ⁽¹⁾⁽²⁾			12/18/2	800				P		355	A	\$3.59	966	165,673		I	Thro Partr		ugh ership ⁽³⁾	
Common S	tock ⁽¹⁾⁽²⁾			12/18/2	800				P		5,897	A	\$3.50	633	33 171,570		I		Through Partnership ⁽³⁾		
Common S	tock ⁽¹⁾⁽²⁾			12/19/2	800				P		1,170	A	\$3.61	175	75 172,740		I		Through Partnership ⁽³⁾		
Common S	tock ⁽¹⁾⁽²⁾			12/19/2	800				P		6,602	A \$3.		954	179,342		I		Through Partnership ⁽³⁾		
Common Stock ⁽¹⁾⁽²⁾ 12/22/20			800)08			P		3	A \$3.25		25	179,345		I		Through Partnership ⁽³⁾				
		7	able								sposed of, , convertil				Owned						
Security or Exercise (Month/Day/Year) if any		emed tion Date,	4. Transa	saction e (Instr. Securities Acquired or Dispos of (D) (Ins 3, 4 and 5		mber of 6 Extive (I street (A) sposed (Instr.		ate Ex	ercisable and	7. Title of Sec Under Deriva	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		Derivative Security	deriv Secu Bene Owne Follo Repo	rities ficially ed wing orted	10. Owner Form: Direct or Indi (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exe	e ercisab	Expiration le Date	Title	or Nu of	ımbeı		Transaction(s) (Instr. 4)					
3.5% Senior Convertible Note due 2011 ⁽¹⁾⁽²⁾	\$11.2185	12/18/2008			P		66,000		(4)		02/15/2011		Common Stock 5,8		\$52.84	662,000		I		Through Partnership	
3.5% Subordinated Convertible Note due 2011 ⁽¹⁾⁽²⁾	\$11.2185	12/19/2008			P	P 124,000			(4)		02/15/2011		Common Stock 11,		3 \$51.0342 1		124,000			Through Partnership	
3.5% Senior Convertible Note due 2011 ⁽¹⁾⁽²⁾	\$11.2185	12/19/2008			P		206,000			(4)	02/15/2011	Comm		3,363	\$52.7583	80	68,000	I		Through Partnership	
1. Name and	Address of R	eporting Person*																			

(Street) NEW YORK	NY	US 10021							
(City)	(State)	(Zip)							
1. Name and Address o									
(Last)	(First)	(Middle)							
667 MADISON AV	667 MADISON AVENUE, 17TH FLOOR								
(Street) NEW YORK	NY	US 10021							
(City)	(State)	(Zip)							
1. Name and Address o									
(Last)	(First)	(Middle)							
667 MADISON AVENUE, 17TH FLOOR									
(Street)									
NEW YORK	NY	US 10021							
(City)	(State)	(Zip)							

Explanation of Responses:

1. In addition to 14159 Capital (GP), LLC, this Form 4 is being filed jointly by Julian C. Baker and Felix J. Baker each of whom has the same business address as 14159 Capital (GP), LLC and may be deemed to have a pecuniary interest in securities owned by it. Julian C. Baker is a Director of the Issuer. Because of certain relationships with other security holders of the Issuer, the Reporting Persons are filing solely for informational purposes as if they were members of a group of such shareholders. (Continued in footnote 2).

- 2. However, the Reporting Persons disclaim that they 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 they are the beneficial owners of securities owned by any such other persons, and each of them disclaims beneficial ownership of securities reported herein except to the extent of their pecuniary interest, if any, therein.
- 3. Represents securities owned directly by 14159, L.P., the sole general partner of which is 14159 Capital, L.P., a limited partnership the sole general partner of which is 14159 Capital (GP), LLC. Julian C. Baker and Felix J. Baker are the controlling members of 14159 Capital (GP), LLC.
- 4. Immediately.

/s/ Julian C. Baker, as Managing
Member of 14159 Capital (CP) 12/2

Member of 14159 Capital (GP), 12/22/2008

LLC

 /s/ Julian C. Baker
 12/22/2008

 /s/ Felix J. Baker
 12/22/2008

 ** 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.