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 b	urden									
hours por rosponso:	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* Huber Reid M					2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) 1801 AUGUSTINE CUT-OFF						3. Date of Earliest Transaction (Month/Day/Year) 01/07/2016									below)		give title Other (sp. below) Chief Scientific Officer		·			
(Street) WILMINGTON DE 19803				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicab Line) X Form filed by One Reporting Person Form filed by More than One Reporting								
(City) (State) (Zip)																Person						
1 Title of 9	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned . Title of Security (Instr. 3) 2. Transaction 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature															7. Nature						
2. This of	scourty (ms	0,		Date	/Day/Year) if		Execution Date, if any (Month/Day/Year)		e, Transaction Code (Instr.		n Disposed Of (D) (Instr. 3,			Securitie Benefici Owned F	Securities Beneficially Owned Following		ı: Direct r Indirect ıstr. 4)	of Indirect Beneficial Ownership				
									Code	v	Amount	unt (A) or (D)		Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)			
Common	Stock			01/07	07/2016				A		2,6100	O ⁽¹⁾ A		\$0.00	65	65,669		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.				Date, T	4. Transaction Code (Instr.		n of l		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				c	ode V	,	(A)	(D)	Date Exercisab		Expiration Date	Title	or Nu of	nount imber ares								
Non- Qualified Stock Option (right to buy)	\$95.76	01/07/2016			A		18,198		(2)		01/06/2023	Commo Stock		3,198	\$0.00	18,198	3	D				
Incentive Stock Option (right to buy)	\$95.76	01/07/2016			A		586		(2)	(01/06/2023	Commo Stock		586	\$0.00	586		D				
Non- Qualified Stock Option (right to buy)	\$95.76	01/07/2016			A		21,170		(3)	(01/06/2026	Commo		,170	\$0.00	21,170)	D				
Incentive Stock Option (right to	\$95.76	01/07/2016			A		1,044		(3)		01/06/2026	Commo		,044	\$0.00	1,044		D				

Explanation of Responses:

- 1. Represents award of restricted stock units ("RSUs") that will vest in full on January 7, 2019, subject to Mr. Huber'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.
- 2. Beginning January 7, 2016, options become exercisable in 25 installments, with the first 33.33% vesting after one year and the remainder vesting monthly over two years.
- 3. Beginning January 7, 2016, options become exercisable in full on January 7, 2020.

Remarks:

/s/ Eric Siegel, Attorney-In-

01/08/2016

** 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.