FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

shington,	D.C.	20549		
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OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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Check this box if no longer subje	:C
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* <u>Iyengar Vijay K</u>					2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]								Checl	k all app Direc	ionship of Reporting all applicable) Director		rson(s) to Is 10% Ov Other (s	wner	
(Last) (First) (Middle) 1801 AUGUSTINE CUT-OFF					3. Date of Earliest Transaction (Month/Day/Year) 02/14/2024								X	Officer (give title below) EVP, GM			below)	specify	
(Street) WILMINGTON DE 19803					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	,				
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - Nor	n-Deriva	tive S	Secur	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date		Date,	Transaction Disposed Code (Instr. 5)		Disposed 0	es Acquired (A) Of (D) (Instr. 3, 4		, 4 and Sec Ben Owr		curities F neficially (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or Pric	e	Transaction(s) (Instr. 3 and 4)				, , ,
Common Stock 02/14/					2024		A		7,377(1)	A		50,789		789 ⁽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	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired sed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		<u> </u>		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

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, 2024. The earned shares will vest on the third anniversary of the July 2, 2021 grant date, subject to the Reporting Persons continued service with the Issuer. Each performance share represents the right to receive one or more shares of common stock based on, and subject to, the achievement of specified financial and development performance criteria determined by the Issuers Compensation Committee in January 2021 as set forth in the Performance Share Award Agreement. The number of shares of common stock that the Reporting Person is entitled to receive over the three year performance period ranges from 0% to 150% of the

2. Includes an aggregate of 38,533 shares of common stock issuable pursuant to previously reported restricted stock units and earned performance stock units that have not vested.

Remarks:

/s/ Elizabeth Feeney, Attorney-In-Fact

02/16/2024

** 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.