FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
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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* <u>HARRIGAN EDMUND</u>						2. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
														X	Directo	r		10% Ov	vner	
(Last) (First) (Middle) 1801 AUGUSTINE CUT-OFF						3. Date of Earliest Transaction (Month/Day/Year) 05/26/2020								Officer (give title Other (the below) below)					specify	
				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Ct== at)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)						
(Street)	ICTON D		10000											X	Form fi	led by One	Repo	orting Perso	n	
WILMIN	IGTON D	E	19803											Form filed by More than One Reporting						
-															Person				Tung	
(City)	(S	tate)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1 Title of 9	Security (Ins	tr 3)		2. Trans	action		2A. Deeme	ed	3.		4. Securi	ties Acquir	ed (A) o	or	5. Amou	nt of	6. Ov	vnership	7. Nature	
		0,		Date		Execution Date,				action	Disposed	d Of (D) (Ins			s	Form	: Direct c	of Indirect		
(Month/E						ay/Year) if any (Month/Day/Year)			Code (Instr. 5) r) 8)					Beneficia Owned F				Beneficial Ownership		
						, , , , , , , , , , , , , , , , , , , ,			` 	Т		(0) -	. T			Reported Transaction(s)			(Instr. 4)	
									Code	۱v	Amount	Amount (A) or Pr		ce	(Instr. 3					
Common Stock 05/26				/2020		A		1,282	1,282 ⁽¹⁾ A \$		0.00	1,	1,946		D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., p	uts,	call	s, warr	ants	, optio	ns, c	onvertil	ble secu	urities	s)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date, T	Transa Code (I		of		6. Date Exercisa Expiration Date (Month/Day/Year		9	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	per						
Non- Qualified Stock Option (right to buy)	\$98.68	05/26/2020			A		10,514		(2)		05/25/2030	Common Stock	10,5	14	\$0.00	10,514	4	D		

Explanation of Responses:

- 1. This award of restricted stock units ("RSUs") vests in full on the first anniversary of the date of grant or, if earlier, the date of the next regular annual meeting of the Company's stockholders or upon a change of control (as defined in the Amended and Restated 2010 Stock Incentive Plan). The RSUs may be settled only for shares of common stock on a one-for-one basis.
- 2. This option vests in full on the first anniversary of the date of grant or, if earlier, the date of the next regular annual meeting of the Company's stockholders or upon change of control (as defined in the Amended and Restated 2010 Stock Incentive Plan).

Remarks:

/s/ Michael J. Purvis, Attorney-**In-Fact**

** Signature of Reporting Person

05/28/2020 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.