FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number: 3235-0104

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

or Section 30(n) of the Investment Company Act of 1940												
1. Name and Address of Reporting Person* GRYSKA DAVID W				2. Date of Event Requiring Statement (Month/Day/Year) 10/31/2014			3. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]					
(Last) 1801 AUGUSTINE ((First) (Middle) GUSTINE CUT-OFF				Relationship of Reporting Person(s) to Issuer (Check all applicable) Director		10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) WILMINGTON (City)	DE (State)	19803 (Zip)				х	Officer (give title below) Executive Vice Presiden	Other (specify b	elow)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						2. Amount o (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)				2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Deri (Instr. 4)		vative Security	4. Conversion Exercise Price of Derivative	ce Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
				Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Security			

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ David W. Gryska

** Signature of Reporting Person

11/04/2014

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 5 (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.

Power of Attorney

Know all by these presents that the undersigned hereby constitutes and appoints Eric H. Siegel the undersigned's true and lawful attorney-in-fact to:

- (1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Incyte Corporation (the ?Company?), Form
- (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4,
- (3) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to,:

 The undersigned hereby grants to such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary.

 This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the undersigned in MITNESS whereof, the undersigned has caused this Power of Attorney to be executed as of this 4th day of November, 2014.

/s/ David Gryska David Gryska

2 705556064v1

705556064v1