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FOUSE JACQUALYN A Form 3 November 16, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> FOUSE JACQUALYN A	Statement		3. Issuer Name and Ticker or Trading Symbol INCYTE CORP [INCY]				
(Last) (First) (Mide	_{dle)} 11/14/2017	4. Relationshij Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)		
1801 AUGUSTINE CUT-OF	ŦF						
(Street)		(Check	(Check all applicable) 6		6. Individual or Joint/Group		
WILMINGTON, DE 198	03	X Director Officer (give title below	<pre> 10% Owr Other (specify below)</pre>	_X_Form Person	eck Applicable Line) filed by One Reporting filed by More than One Person		
(City) (State) (Zip	D) Table I	- Non-Derivati	ive Securities	Beneficiall	y Owned		
1.Title of Security (Instr. 4)		nt of Securities Illy Owned	Ownership Ov	Nature of Indi vnership ıstr. 5)	irect Beneficial		
Reminder: Report on a separate line owned directly or indirectly.	for each class of securities bene	eficially SE	EC 1473 (7-02)				
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Table II - Derivative	e Securities Beneficially Owned	d (e.g., puts, calls,	warrants, option	s, convertible	e securities)		
1. Title of Derivative Security (Instr. 4)	Expiration Date Secu	itle and Amount of arities Underlying avative Security tr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Date

Exercisable

Expiration

Title

Date

Security:

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

OMB APPROVAL

Number:	3235-0104					
Expires:	January 31, 2005					
Estimated average						
burden hou	rs per					
response	0.5					

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
FOUSE JACQUALYN A 1801 AUGUSTINE CUT-OFF WILMINGTON, DE 19803	ÂX	Â	Â	Â	
Signatures					
/s/ Eric H. Siegel, Attorney-In-Fact	1				
**Signature of Reporting Person		Date			

Explanation of Responses:

No securities are beneficially owned

* 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).

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Remarks:

No securities are beneficially owned.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.