#### Edgar Filing: Stein Steven H - Form 4

Stein Steven	Η									
Form 4										
July 18, 201										PROVAL
FORM	<b>14</b> UNITED	STATES S					NGE C	OMMISSION	OMB OMB Number:	3235-0287
Check this box if no longer				shington, D.C. 20549 IGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31, 2005 Estimated average burden hours per response 0.5	
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(	a) of the P	ublic Ut		ling Con	ipany	Act of	e Act of 1934, 7 1935 or Section 0		
(Print or Type I	Responses)									
Stein Steven H Symbol			er Name <b>and</b> Ticker or Trading ΓΕ CORP [INCY]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			of Earliest Transaction Day/Year) 2018				Director 10% Owner Officer (give title Other (specify below) below) EVP & Chief Medical Officer			
			nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WILMING	TON, DE 19803							Form filed by M Person		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8) Code V	(Instr. 3,	sposed 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Common Stock	07/16/2018			F	577 <u>(1)</u>	D	\$ 70.19	14,620 <u>(2)</u>	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
1 0	Director	10% Owner	Officer	Other				
Stein Steven H 1801 AUGUSTINE CUT-OFF WILMINGTON, DE 19803			EVP & Chief Medical Officer					

## Signatures

/s/ Paul Trower,	07/18/20
Attorney-In-Fact	07/18/20

\*\*Signature of Reporting Person

Date

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# **Explanation of Responses:**

- \* 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).
- (1) Represents shares withheld automatically by the Issuer to satisfy tax withholding obligations due at settlement of restricted stock units previously reported in Table I as common stock.
- (2) Includes an aggregate of 8,026 shares of common stock issuable pursuant to previously reported restricted stock units that have not vested.

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.