Shapiro David Form 4 October 03, 2018

FORM 4

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

OMB Number:

3235-0287

Expires: January 31, 2005

OMB APPROVAL

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5
obligations
may continue.
See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person **
Shapiro David

2. Issuer Name and Ticker or Trading

1

Symbol INTERCEPT

PHARMACEUTICALS, INC.

[ICPT]

(Last) (First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year)

01/01/2018

5. Relationship of Reporting Person(s) to

Issuer

below)

(Check all applicable)

____ Director _____ 10% Owner ____ X__ Officer (give title ____ Other (specify

Chief Medical Officer

C/O INTERCEPT

PHARMACEUTICALS, INC., 10 HUDSON YARDS, FLOOR 37

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person ____ Form filed by More than One Reporting

Person

NEW YORK, NY 10001

(City)	(State)	(Zip) Tabl	e I - Non-D	D erivative	Secur	ities Acqui	ired, Disposed of	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	01/01/2018		F	1,020 (1)	D		39,911 (2)	D	
Common Stock	04/01/2018		F	423 (1)	D	\$ 61.52	39,911 <u>(2)</u>	D	
Common Stock	07/01/2018		F	416 (1)	D	\$ 83.91	39,911 (2)	D	
Common Stock	10/01/2018		F	426 (1)	D	\$ 126.46	39,911 <u>(2)</u>	D	

Edgar Filing: Shapiro David - Form 4

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

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

 Title of 	2.	3. Transaction Date	3A. Deemed	4.	:	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transa	ction	Number	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code	,	of	(Month/Day/	Year)	Unde	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Derivative	•		Secur	rities	(Instr. 5)
	Derivative					Securities			(Instr	. 3 and 4)	
	Security					Acquired					
	Ĭ				((A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
						., ,					
										Amount	
							Date	Expiration		or	
							Exercisable Date	•	Title N	Number	
								of	of		
				Code	V	(A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Shapiro David C/O INTERCEPT PHARMACEUTICALS, INC. 10 HUDSON YARDS, FLOOR 37 NEW YORK, NY 10001

Chief Medical Officer

Signatures

/s/ Mark Pruzanski, as attorney-in-fact

10/03/2018

**Signature of Reporting Person Date

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 of common stock withheld to satisfy taxes associated with the vesting of restricted stock.
- (2) In each case, the amount of securities beneficially owned following the reported transactions is provided as of the date of this Form 4.

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.

Reporting Owners 2