

## INTERCEPT PHARMACEUTICALS INC

# Reported by SBLENDORIO GLENN

#### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 06/29/17 for the Period Ending 06/27/17

Address 450 W. 15TH STREET

SUITE 505

NEW YORK, NY 10011

Telephone 646-747-1000

CIK 0001270073

Symbol ICPT

SIC Code 2834 - Pharmaceutical Preparations

Industry Biotechnology & Medical Research

Sector Healthcare

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name and Ticker or Trading Symbol										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SBLENDORIO GLENN						INTERCEPT PHARMACEUTICALS INC   ICPT									X Director	,	!	10% Owner		
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)										Officer (gi	ve title belov	v)O	ther (specify	below)	
C/O INTER								6/2	27/20	)17										
PHARMAC		,	,																	
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NEW YORK, NY 10001 (City) (State) (Zip)													_ >	X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(,	nty) (St		• /					•.•					4 D							
1 Trid 60 '			Table					3. Trans. C							cially Own		11.0.1	Iz	7. Nature	
1. Title of Security (Instr. 3)				2. Irans. D	Date 2A. Deemed Execution Date, if any			(Instr. 8)	or Disposed of (D) (Instr. 3, 4 and 5)			<b>)</b> ) ` ´	5. Amount of Securities Following Reported To (Instr. 3 and 4)				Ownership Form:	of Indirect Beneficial Ownership		
								Code	V	Amo		(A) (D)							(Instr. 4)	
Common Stock 6/27/20				6/27/201	17			A		1423	<u>(1)</u>	A	\$0		3729			D		
	Tab	le II - Der	ivative						( e.g.	, puts	s, cal	ls, w	arrants	s, opt	ions, conve	ertible sec	curities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Dee Execution Date, if	on (Inst			5. Number Derivative Securities (A) or Di (D) (Instr. 3,	Acquired sposed of		ate Exercisable and ration Date		7. Title at Securities Derivativ (Instr. 3 a	s Unde ve Secu	rlying	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Со	de	V (		(D)	Date Exerc	Expiration isable Date		ation	Title	Ni	mount or umber of nares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		
Option to Purchase Common Stock	\$122.01	6/27/2017		A	,		2036		1	<u>(1)</u>	6/27/	2027	Commo Stock		2036	\$0	2036	D		

#### **Explanation of Responses:**

(1) The 1,423 shares of restricted stock and the shares of 2,036 shares of common stock underlying the option will each fully vest on the one-year anniversary of the date of grant (the "Anniversary Date"), subject to the terms and conditions of the award and the Intercept Pharmaceuticals, Inc. 2012 Equity Incentive Plan (the "2012 Plan"); provided, however, if the date of the next subsequent annual meeting of stockholders (starting from the 2018 annual meeting) is held prior to the Anniversary Date in that year, the annual vesting for such year shall occur on the day immediately preceding the date of the annual meeting in such year.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SBLENDORIO GLENN						
C/O INTERCEPT PHARMACEUTICALS, INC.	v					
10 HUDSON YARDS, FLOOR 37	71					
NEW YORK, NY 10001						

#### **Signatures**

/s/ Bryan Yoon, as attorney-in-fact 6/29/2017

\*\* Signature of Reporting Person

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 control number.