Shapiro David Form 4 April 16, 2019

## FORM 4

Check this box

if no longer

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB 3235-0287 Number:

Expires:

January 31, 2005

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subject to Section 16. Form 4 or Form 5 obligations

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)

C/O INTERCEPT

may continue.

See Instruction

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

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

(Zip)

**INTERCEPT** PHARMACEUTICALS, INC.

(Check all applicable)

[ICPT]

(Last) (First) (Middle)

3. Date of Earliest Transaction

X\_ Officer (give title below)

Director

10% Owner Other (specify

(Month/Day/Year) 04/15/2019

Chief Medical Officer

PHARMACEUTICALS, INC., 10 **HUDSON YARDS, FLOOR 37** 

(Street)

(State)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person

Filed(Month/Day/Year)

Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

NEW YORK, NY 10001

(City)

							,	,	•
1.Title of Security	2. Transaction Date (Month/Day/Year)		3. Transactio	4. Securities Acquired on(A) or Disposed of			5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
(Instr. 3)	(Month Buy/ Tour)	any	Code (D)			Beneficially	(D) or	Beneficial	
(111301. 3)		(Month/Day/Year)	(Instr. 8)	` '			Owned	Indirect (I)	Ownership
		(Month/Day/Tear)	(msu. o)	(Instr. 3, 4 and 5)				` '	
							Following	(Instr. 4)	(Instr. 4)
							Reported		
					(A)		Transaction(s)		
					or		(Instr. 3 and 4)		
			Code V	Amount	(D)	Price	(IIISII. 3 aliu 4)		
Common Stock	04/15/2019		M(1)	2,000	A	\$ 31.9	41,499	D	
Common Stock	04/15/2019		S(1)	2,000	D	\$ 95	39,499	D	

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

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### Edgar Filing: Shapiro David - Form 4

#### number.

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

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. Transactic Code (Instr. 8)	5. Number omf Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Purchase Common Stock	\$ 31.9	04/15/2019		M <u>(1)</u>		2,000	(2)	05/07/2023	Common Stock	2,000	

## **Reporting Owners**

Reporting Owner Name / Address

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

04/16/2019

\*\*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) This transaction was effected pursuant to a pre-existing Rule 10b5-1 trading plan adopted by the reporting person.
- (2) This option is fully vested and exercisable.

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.

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