Duncan Barbara Gayle Form 3 October 10, 2012

FORM 3

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

OMB APPROVAL

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3235-0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement INTERCEPT PHARMACEUTICALS INC [ICPT] À Duncan Barbara Gayle (Month/Day/Year) 10/10/2012 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O INTERCEPT (Check all applicable) PHARMACEUTICALS, INC.. 18 DESBROSSES 10% Owner Director STREET _X__ Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group Chief Financial Officer Filing(Check Applicable Line) _X_ Form filed by One Reporting NEW YORK, NYÂ 10013 Person Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) (Instr. 5) Form: Direct (D) or Indirect (I) (Instr. 5) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

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

currently valid OMB control number.

3. Title and Amount of 1. Title of Derivative Security 2. Date Exercisable and 5. 6. Nature of Indirect 4. Securities Underlying Conversion Ownership Beneficial Ownership (Instr. 4) **Expiration Date** (Month/Day/Year) or Exercise Form of (Instr. 5) Derivative Security (Instr. 4) Price of Derivative Derivative Security:

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Options to Purchase Common Stock	(1)	05/18/2019	Common Stock	86,538 (2)	\$ 9.82 (2)	D	Â
Options to Purchase Common Stock	(3)	07/20/2020	Common Stock	47,595 <u>(2)</u>	\$ 8.67 (2)	D	Â
Options to Purchase Common Stock	(4)	10/13/2021	Common Stock	13,413 (2)	\$ 8.67 (2)	D	Â

Reporting Owners

Reporting Owner Name / Address		Relationships				
	Director	10% Owner	Officer	Other		
Duncan Barbara Gayle C/O INTERCEPT PHARMACEUTICALS, INC. 18 DESBROSSES STREET NEW YORK Â NYÂ 10013	Â	Â	Chief Financial Officer	Â		

Signatures

/s/ Barbara
Duncan

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- 25% of the shares underlying this option vested on May 18, 2010, the one-year anniversary of the grant date, and the remainder of the (1) shares originally underlying the option vest on a pro rata monthly basis through May 31, 2013, subject to the terms and conditions thereof.
- Reflects the 1-for-5.7778 reverse stock split effected on September 26, 2012 in connection with the Issuer's initial public offering,
- (2) pursuant to which (i) the number of shares of common stock underlying the option was divided by 5.7778 and (ii) the exercise price of the option was multiplied by 5.7778.
- (3) 25% of the shares underlying this option were vested on December 31, 2010, and the remainder of the shares originally underlying the option vest on a pro rata monthly basis through December 31, 2013, subject to the terms and conditions thereof.
- (4) 19.59% of the shares underlying this option were vested on October 13, 2011, the date of grant, and the remainder of the shares originally underlying the option vest on a pro rata monthly basis through December 31, 2014, subject to the terms and conditions thereof.

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Remarks:

Exhibit List - Exhibit 24 - Power of Attorney

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