#### Edgar Filing: INTERCEPT PHARMACEUTICALS INC - Form 3

INTERCEPT PHARMACEUTICALS INC Form 3 February 27, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3

# Washington, D.C. 20549

#### **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

#### **OMB APPROVAL**

OMB 3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Durso Jerome Benedict			<ul><li>2. Date of Event Requiring</li><li>Statement</li><li>(Month/Day/Year)</li></ul>	3. Issuer Name and Ticker or Trading Symbol INTERCEPT PHARMACEUTICALS INC [ICPT			
(Last)	(First)	(Middle)	02/23/2017	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)		

#### C/O INTERCEPT PHARMACEUTICALS, INC., 450 W. 15TH STREET, **SUITE 505**

(Street)

## NEW YORK, NYÂ 10011

(City)	(State)	(Z

1. Title of Security (Instr. 4)

Zip)

Table I - Non-Derivative Securities Beneficially Owned

10% Owner

Other

(Check all applicable)

(give title below) (specify below)

Chief Operating Officer

Director

\_X\_ Officer

2. Amount of Securities Beneficially Owned (Instr. 4)

3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)

SEC 1473 (7-02)

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Reporting Person

Person

Filed(Month/Day/Year)

6. Individual or Joint/Group

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Form filed by More than One

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships			
	Director	10% Owner	Officer	Other
Durso Jerome Benedict C/O INTERCEPT PHARMACEUTICALS, INC. 450 W. 15TH STREET, SUITE 505 NEW YORK, NY 10011	Â	Â	Chief Operating Officer	Â
Signatures				
/s/ Bryan Yoon, as attorney-in-fact 02/27/2017				

<u>\*\*</u>Signature of Reporting Person

Date

## **Explanation of Responses:**

#### No securities are beneficially owned

- \* 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).

## Â

#### **Remarks:**

#### Exhibit List- Exhibit 24.1- 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.