FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number 3235-0287 Estimated average burden hours per response: 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 a VAN N	Intra	2. Issuer Name and Ticker or Trading Symbol Intra-Cellular Therapies, Inc. [ITCI] 3. Date of Equipt Transaction (Manth/Day/Mast)									Relationship eck all appl X Direct	icable)	ng Pe	erson(s) to l 10% O					
(Last)	(Fi	rst) (3. Date of Earliest Transaction (Month/Day/Year) 06/30/2014									Office below	r (give title)		Other (below)	specify		
C/O INTRA-CELLULAR THERAPIES, INC. 3960 BROADWAY						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) NEW YORK NY 10032															X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	(State) (Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) Date (Month/Day						Execution Date,			Transaction Dispo Code (Instr. and 5			urities Acquired (A) sed Of (D) (Instr. 3,			r 5. Amo Securit Benefic Owned Follow	ies cially	es For ally (D) Ind		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amoun	Amount (A) o		Price	Report Transa	Reported Transaction(s) (Instr. 3 and 4)		ur. 4)	(1150.4)
Common Stock 06/30/20)14		Α		444		A	\$ <mark>0</mark>) 444			D		
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. Transact Code (In 8)		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		r. 3	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	or	ount nber ares					
Stock Option (right to buy)	\$16.86	06/30/2014			A		20,000		06/30/2015	06	/30/2024	Commor Stock	ⁿ 20,	,000	\$0	20,000		D	

Explanation of Responses:

/s/ Lawrence J. Hineline,

07/02/2014

Attorney-in-fact ** 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 Number.