FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
OMB Number:	3235-0287					
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>Alafi Christopher D</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Intra-Cellular Therapies, Inc. [ ITCI ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner									
	FI CAPIT	irst) AL COMPAN	(Middle) Y, LLC		3. Date of Earliest Transaction (Month/Day/Year) 09/30/2019								Office below	er (give tit v)	le	Othe belo	r (specify v)		
8 ADMIRAL DRIVE, SUITE 324					4. If /	Amendm	nent, Date o	of Origin	al File	ed (Month/Da	ıy/Year)		6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) EMERYV	VILLE C.	A	94608										<u>&gt;</u>	K Form	n filed by N	One Reporting Person More than One Reporti			
(City)	(S	tate)	(Zip)																
		Ta	ble I - N	on-Deriva	ative	Secur	ities Ac	quired	d, Di	sposed o	f, or Be	enefic	cially	y Owne	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)						5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount (A) or (D) Price		Price		Transaction(s) (Instr. 3 and 4)				msu. 4 <i>j</i>		
Common	Stock			09/30/20	019			A		1,941	A	\$7.4	47	343,	164	I	)		
Common	Stock													4,673	3,270	:	I	Held by Alafi Capital Company, LLC <sup>(1)</sup>	
Common	Stock													503,	753	:	I	Held as Frustee of The Moshe H. Alafi and Margaret E. Alafi Generation- Skipping Trust <sup>(2)</sup>	
Common Stock												170,000			I	Held by Christopher D Alafi Family Trust <sup>(3)</sup>			
			Table II							osed of, convertib				Owned					
1. Title of Derivative Conversion Date 3A. Deemed Execution Date, T		I. Fransac Code (II	5. Number of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)  3  8. Price of Derivative Security Secur		9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	ive ties Ownersl Form: Direct (C or Indire (I) (Instr. ed ction(s)		Beneficial Ownership (Instr. 4)				
	of Respons			C	Code	v (	A) (D)	Date Exercis	sable	Expiration Date		Amount or Number of Shares							

- 1. Dr. Alafi is a managing partner of Alafi Capital Company, LLC and may be deemed to beneficially own the shares held by Alafi Capital Company, LLC. Dr. Alafi disclaims beneficial ownership of the securities held by Alafi Capital Company, LLC except to the extent of his pecuniary interest therein.
- 2. Dr. Alafi is the Trustee of The Moshe H. Alafi and Margaret E. Alafi Generation-Skipping Trust. Dr. Alafi disclaims beneficial ownership of the securities held by the trust except to the extent of his pecuniary interest therein, if any.
- 3. Shireen Michele Alafi is the Trustee of the Christopher D Alafi Family Trust. Dr. Alafi disclaims beneficial ownership of the securities held by the trust except to the extent of his pecuniary interest therein, if

## Remarks:

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

- $^{\star}$  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.