FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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).

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 and Address of Reporting Person [*] Hineline Lawrence J.						2. Issuer Name and Ticker or Trading Symbol Intra-Cellular Therapies, Inc. [ITCI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O INTRA-CELLULAR THERAPIES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2017								2	below)	(give title VP of Fir	Other (specify below)		specify	
430 EAST 29TH STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW YORK NY 10016													Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)																			
		Tab	le I - No	on-Deriv	vative	Sec	urities	s Acq	uired, I	Disp	oosed of	, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired Disposed Of (D) (Instr. and 5)			5. Amou Securitie Benefici Owned Followir	es ally		: Direct ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) o (D)	Price	Reported Transact (Instr. 3	d tion(s)			(1130.4)	
Common Stock 01/04/20					2017	.017		М		3,107	Α	(1)	(1) 65,307			D			
			Table								osed of, o Invertible			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transac Code (In 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported	re es ally ig d	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial) Ownershi	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		Transact (Instr. 4)				
Stock Option (right to buy)	\$15.73	01/03/2017			A		63,717		(2)		01/03/2027	Common Stock	63,717	\$0.00	63,71	17	D		
Restricted												C							

Explanation of Responses:

(3)

(3)

1. Restricted stock units convert into common stock on a one-for-one basis.

01/03/2017

01/04/2017

2. On January 3, 2017, the reporting person was granted options to purchase 63,717 shares of common stock, vesting in three equal annual installments beginning on the first anniversary of the grant date.

3,107

(4)

(5)

3. Each restricted stock unit represents a contingent right to receive one share of common stock

4. On January 3, 2017, the reporting person was granted 15,893 restricted stock units, vesting in three equal annual installments beginning on the first anniversary of the grant date.

15,893

A

М

5. On January 4, 2016, the reporting person was granted 9,323 restricted stock units, vesting in three equal annual installments beginning on the first anniversary of the grant date.

Remarks:

Stock

Units Restricted

Stock

Units



15,893

3,107

\$0.00

\$0.00

** Signature of Reporting Person

Common

Stock

Commo

Stock

(4)

(5)

01/05/2017 Date

15,893

6,216

D

D

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.