FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
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 and Address of Reporting Person*  VAN NOSTRAND ROBERT L					Intra	2. Issuer Name and Ticker or Trading Symbol Intra-Cellular Therapies, Inc. [ITCI]								heck a	ll appl	ship of Reporting P applicable) irector		erson(s) to Is		
(Last)	,	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/16/2015									Officer (give title below)			Other ( below)	specify	
C/O INTRA-CELLULAR THERAPIES, INC. 430 EAST 29TH STREET					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YO	ORK N	X NY 10016														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (	Zip)																	
		Tab	le I - N	on-Deriv	ative S	Sec	urities	Ac	quired, D	isp	osed o	of, or Be	eneficia	lly O	wne	d				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)						Execution Date,			Code (Ins	Transaction Disposed Code (Instr. and 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4			unt of ies ially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amoun	Amount (A)		, R	Following (Ir Reported Transaction(s) (Instr. 3 and 4)		(Insi	tr. 4)	(Instr. 4)	
	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)	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		n of E		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. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable	Ex <sub>l</sub>	piration te	Title	Amount or Number of Shares							
Stock Option (right to buy)	\$26.58	06/16/2015			A		20,000		06/16/2016	06/	16/2025	Common Stock	20,000	\$	60	20,000		D		

**Explanation of Responses:** 

/s/ Lawrence J. Hineline, Attorney-in-fact

06/22/2015

\*\* Signature of Reporting Person

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).