FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:								

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*  VAN NOSTRAND ROBERT L					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Intra-Cellular Therapies, Inc. [ ITCI ]										k all app Direc	tor	ng Pei	10% O	wner	
C/O INTRA-CELLULAR THERAPIES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 03/31/2022									Office below	er (give title		Other ( below)	specify	
430 EAST 29TH STREET  (Street)  NEW YORK NY 10016						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	-/					
(0.9)	(City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				tion	ion 2A. Deemed Execution Date,			3. 4. Securities Acquir Transaction Disposed Of (D) (Ins Code (Instr. 8)			ired (A)	or	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	Pric	ico Transac		action(s) 3 and 4)			(Instr. 4)	
Common Stock 03/31/20					2022			A		126	A	\$6	1.19	19 8,935			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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ransaction ode (Instr. )  Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities ired r osed ) 1. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amount or Numbor of Shares		nt er				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

**Explanation of Responses:** 

Remarks:

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

04/04/2022

\*\* Signature of Reporting Person

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.