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Intra-Cellular Therapies, Inc. Form 4 January 03, 2017

January 03, 20	017											
FORM 4 LINITED STATES SECURITIES AN					ND EVOLUNCE COMMISSION				OMB APPROVAL			
	- UNITED S	UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549								3235-0287		
Check this		g.o, .	Number: Expires:	January 31,								
if no longe subject to	F CHANGES IN BENEFICIAL OW					NERSHIP OF	Estimated a	2005 average				
Section 16		SECURITIES							burden hou	irs per		
Form 4 or Form 5		uant to S	Section 16	$\delta(a)$ of the	Securiti	ec Fr	zehani	ge Act of 1934,	response	0.5		
obligation	⁸ Section $17(a)$							of 1935 or Section	n			
may contin <i>See</i> Instruc 1(b).	nue.			vestment (•	• •						
(Print or Type Ro	esponses)											
I EDNED DICILADD A				Name and 7	Ticker or T	Fradin	g	5. Relationship of Reporting Person(s) to Issuer				
	Symbol Intra-Cel	llular The	rapies. Iı	nc. []	TCI							
(Last)	3. Date of Earliest Transaction					(Check all applicable)						
(Last) (First) (Middle) 3. Date of (Month/Da								_X_ Director 10% Owner				
C/O INTRA-		г	12/30/20)16				Officer (give below)	e title Oth below)	er (specify		
29TH STREE	8, INC., 430 EAS' ET	1										
2,111011(1)	(Street)		4 If Amer	ndment Dat	e Original			6 Individual or I	oint/Group Fili	ng(Check		
	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)						
NEW YORK	, NY 10016							_X_ Form filed by Form filed by I Person	One Reporting Po More than One Ro			
(City)	(State) (2	Zip)	Table	I - Non-De	erivative S	ecuri	ties A.c	quired, Disposed o	f or Beneficia	lly Owned		
1.Title of	2. Transaction Date	24 Dee		3.	4. Securit		ites At	5. Amount of	6. Ownership	-		
Security	(Month/Day/Year)								Form: Direct	Indirect		
(Instr. 3)		any (Month/	CodeDisposed of (D)'Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					•	(D) or Indirect (I)	Beneficial Ownership		
		(Wonth)	(Inst. 0) (Inst.			i unu	5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	12/30/2016			A	911	(D) A	\$ 0	5 707	D			
Stock	12/30/2010			A	911	A	\$0	5,797	D			
										Held by		
~										the Lerner		
Common Stock								47,500	Ι	Family Trust UAD		
SIUCK										11/14/94 (1)		

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

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 control number.

 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)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

RelationshipReporting Owner Name / AddressDirector10% OwnerOfficerOtherDirector10% OwnerOfficerOtherLERNER RICHARD A
C/O INTRA-CELLULAR THERAPIES, INC.
430 EAST 29TH STREET
NEW YORK, NY 10016XXXXXSignatures
/s/ Lawrence J. Hineline,
Attorney-in-fact01/03/2017VVVV

Explanation of Responses:

- * 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).
- (1) Dr. Lerner may be deemed to beneficially own securities held by the Lerner Family Trust UAD 11/14/94 (the "Lerner Family Trust"). Dr. Lerner disclaims beneficial ownership of securities held by the Lerner Family Trust except to the extent of his pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.