## Edgar Filing: Intra-Cellular Therapies, Inc. - Form 4

Intra-Cellu Form 4 April 04, 20	lar Therapies, Inc. 017												
										OMB APPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCH Washington, D.C. 20549										OMB Number: 32		287	
if no lo subject Section Form 4 Form 5 obligati	to 16. or Filed pu ions Section 17	rsuant to S	Section	<b>SECU</b> 16(a) of	<b>RITIES</b>	rities	Exch	WNERSHIP OF Es bu			es: lated av en hours inse	erage s per	31, 005 0.5
may co <i>See</i> Ins 1(b).	truction	30(h)	of the l	Investmen	nt Compa	any A	Act of	1940					
(Print or Type	e Responses)												
1. Name and Address of Reporting Person <u>*</u> Alafi Christopher D			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer					
( <b>*</b> ))		~ <b>.</b>	Intra-Cellular Therapies, Inc. [ITC					[]	all applicable)				
(Last) (First) (Middle) C/O ALAFI CAPITAL COMPANY, LLC, 8 ADMIRAL DRIVE, SUITE 324			<ul><li>3. Date of Earliest Transaction (Month/Day/Year)</li><li>03/31/2017</li></ul>					X_ DirectorX_ 10% Owner Officer (give titleOther (specify below) below)					
(Street) EMERYVILLE, CA 94608			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Та	ble I - Non	-Derivativ	ze Sec	urities	Acquired, Disp	osed of.	or Ben	eficially	owned	
1.Title of Security (Instr. 3)		nsaction Date 2A. Deemed h/Day/Year) Execution Dat any (Month/Day/Y			3. 4. Securities					7. Nature of Indirect Beneficial Ownership (Instr. 4) (D) irect 4)			
Common Stock	03/31/2017			А	892	А	\$0	732,381	D				
Common Stock								3,695,205	Ι			y Alafi ( my, LLO	-
Common Stock								503,753	Ι		The M and Ma Alafi	s Truste oshe H. argaret I ation-Sk	Alafi E.

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)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Alafi Christopher D C/O ALAFI CAPITAL COMPANY, LLC 8 ADMIRAL DRIVE, SUITE 324 EMERYVILLE, CA 94608	Х	Х						
Signatures								
/s/ Lawrence J. Hineline, Attorney-in-fact	04/04/2	2017						
**Signature of Reporting Person	Dat	te						

## **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).

Dr. Alafi is a managing partner of Alafi Capital Company, LLC and may be deemed to beneficially own the shares held by Alafi Capital(1) 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.

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.