FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
l	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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person*  Rasmussen Torsten					<u>A(</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC ACAD ]								5. Relationship of Reporting (Check all applicable) X Director			10% Owner	
(Last) (First) (Middle) C/O ACADIA PHARMACEUTICALS INC. 3911 SORRENTO VALLEY BOULEVARD					03/	Officer (give title below)  3. Date of Earliest Transaction (Month/Day/Year)  03/18/2008  Officer (give title below)  below)  below)												
(Street) 92121				_   4.  1	4. If Amendment, Date of 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											on		
(City)	(S	tate)	(Zip)		-									Persoi		ore mar	т Опе кер	orung
		Tah	le I - No	n-Deri	vative	Sec	vuriti	ios Δ <i>ι</i>	rauired	Die	nosed c	of or Re	neficis	Ilv Owner	1			
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transa Date (Month/D			action	2/ Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (I	3. 4. Securiti Transaction Disposed Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)
Common	Stock			03/1	8/2008				M		1,000	) A	\$1.	2 1,0	000			See footnote <sup>(1)</sup>
Common Stock 03/18/				8/2008	2008			M		1,000	) A	\$1.	8 2,0	2,000			See footnote <sup>(1)</sup>	
Common Stock 03/18/2				8/2008	2008			М		1,000	) A	A \$1.8		3,000			See footnote <sup>(1)</sup>	
Common Stock 03/18/2				8/2008	2008			М		1,000	1,000 A		4,0	000			See footnote <sup>(1)</sup>	
		1	able II -									, or Ben ble secu		ly Owned			•	
1. Title of Derivative Security (Instr. 3)	Conversion Date Executor Exercise (Month/Day/Year) if any		3A. Deem Execution if any (Month/Da	n Date, Transacti Code (Ins			ion 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)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares					
Stock option (right to buy)	\$1.2	03/18/2008			M			1,000	(2)	(	)4/27/2008	Common Stock	1,000	\$0	0		I	See footnote <sup>(1)</sup>
Stock option (right to buy)	\$1.8	03/18/2008			M			1,000	(2)	(	03/01/2009	Common Stock	1,000	\$0	0		I	See footnote <sup>(1)</sup>
Stock option (right to buy)	\$1.8	03/18/2008			M			1,000	(2)	(	03/06/2010	Common Stock	1,000	\$0	0		I	See footnote <sup>(1)</sup>
Stock option (right to buy)	\$4	03/18/2008			M			1,000	(2)		12/04/2010	common Stock	1,000	\$0	0		I	See footnote <sup>(1)</sup>
xplanatio	n of Respons	ses:																

- 1. Shares and options are held by Morgan Management ApS, a Danish corporation in which Mr. Rasmussen has a controlling interest.
- 2. Immediately

/s/ Uli Hacksell, attorney-in-

03/20/2008

**fact** 

\*\* Signature of Reporting Person

Date

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.