FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										

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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

Name and Address of Reporting Person* <u>Stankovic Srdjan R.</u>				<u> </u>	2. Issuer Name and Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC [ACAD]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify				
(Last) (First) (Middle) C/O ACADIA PHARMACEUTICALS INC. 3611 VALLEY CENTRE DRIVE, STE. 300				0-	3. Date of Earliest Transaction (Month/Day/Year) 04/29/2019 4. If Amendment, Date of Original Filed (Month/Day/Year)								below)		sident		licable
(Street) SAN DIEGO CA 92130				*-	4. II Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)	erivati	rative Securities Acquired, Disposed of, or Beneficially Owned												
1. Title of Security (Instr. 3) 2. Transa Date				Transactio	action 2A. Deemed Execution Date,		3. 4. Securities Acquir Transaction Code (Instr.		ed (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) oi (D)	Price	Transacti	Reported Transaction(s) (Instr. 3 and 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 Onte (Month/Day/Year) Price of Derivative Security 3. Transaction Date (Execution Date, if any (Month/Day/Year) (Month/Day/Year) 3. Transaction Execution Date, if any (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year) 3. Transaction Date (Month/Day/Year)			action (Instr.	5. Number Derivative Securities Acquired or Dispos of (D) (In: 3, 4 and 9	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 of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		Transaction((Instr. 4)			
Stock Options (Right to Buy)	\$25.12	04/29/2019		A		134,953		(1)	04	4/29/2029	Common Stock	134,953	\$0.00	134,9	53	D	
Restricted Stock Units	(2)	04/29/2019		A		38,462		(3)		(3)	Common Stock	38,462	\$0.00	38,46	62	D	

Explanation of Responses:

- 1. 25% of the shares subject to the Stock Option will vest and become exercisable on April 29, 2020. The remaining shares vest and become exercisable in 36 equal monthly installments thereafter.
- 2. Each restricted stock unit represents a contingent right to receive one share of ACADIA common stock.
- 3. The restricted stock units vest in four equal annual installments beginning April 29, 2020.

Remarks:

/s/ Austin D. Kim, Attorney-in-Fact 05/01/2019

** 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.

 $Persons \ who \ respond \ to \ the \ collection \ of \ information \ contained \ in \ this \ form \ are \ not \ required \ to \ respond \ unless \ the \ form \ displays \ a \ currently \ valid \ OMB \ Number.$