Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMEN |
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| obligations may continue. See | |

IT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Wells William McDowall | | | | <u>A</u> | 2. Issuer Name and Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC ACAD | | | | | (Ch | elationship (eck all applic | cable) or | g Pers | 10% Ow | ner | |
|---|--|--|------------------------------|-----------------|---|-----------------|--|---------------------|---|-----------------|---|---|--------------------------------------|--|--|--------|
| | ADIA PHA | rst) RMACEUTICA /ALLEY BLVD. | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2013 | | | | | | | Officer below) | (give title | | Other (s below) | pecify |
| (Street) | EGO CA | A | 92121 | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | Line | e) <mark>X</mark> Form f Form f | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (S | | (Zip) | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| Date | | | ansaction hth/Day/Y | Execution Date, | | Code (Instr. 5) | | | | | | Form: (D) or | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Code V | Amount | (A) or (D) | Price | Transact (Instr. 3 | ion(s) | | | (11150.4) | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execution D Security or Exercise (Month/Day/Year) if any | | 3A. Deemed Execution Date, if any (Month/Day/Year | 4. Transa Code (8) | | of | | 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 Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (right to buy) | \$17.01 | 06/07/2013 | | A | | 12,500 | | (1) | 06/06/2023 | Common Stock | 12,500 | \$0 | 12,500 | | D | |

Explanation of Responses:

1. 25% of the shares subject to the Stock Option vest and become exercisable at the end of each 3-month period following the date of grant.

/s/ Glenn F. Baity, Attorney-in-

Fact

** Signature of Reporting Person

06/11/2013

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.