| SEC Form 4 | | | | | | | | | | | | | | | | |
|---|---------------|-----------------|--|---|-------------|-------------------|------------------------------------|--|-----------|--|---|---|---|--|--|--|
| FOF | RM 4 | UNITE | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | OMB APPROVAL | | | | |
| Check this box Section 16. Forr obligations may Instruction 1(b). | continue. See | to STA T | Filed pursual | F CHANGES nt to Section 16(a) of ction 30(h) of the In | es Exchange | | | OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | | | | | | | |
| 1. Name and Address of Reporting Person DAVIS STEPHEN (Last) (First) C/O ACADIA PHARMACEUTIC. | | (Middle) | ACA ACA 3. Date | 2. Issuer Name and Ticker or Trading Symbol <u>ACADIA PHARMACEUTICALS INC</u> [ACAD] 3. Date of Earliest Transaction (Month/Day/Year) 01/06/2021 | | | | | | ationship of Rep k all applicable) Director Officer (give below) | , 10% Ow | | Owner (specify | | | |
| 12830 EL CAMINO REAL, SUITE 400 (Street) SAN DIEGO CA 92130 | | | 4. If Ar | 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 Person | | | | | |
| (City) | (State) | (Zip) | | | | | | | | | | | | | | |
| | | Table I - Nor | n-Derivative S | ecurities Acq | uired, | , Dis | posed of, o | or Ben | eficially | Owned | | | | | | |
| Date | | | 2. Transaction Date (Month/Day/Year) | Execution Date, | | action (Instr. | 4. Securities Disposed Of 5) | | | 5. Amount of Securities Beneficially Owned Follow Reported | Fo (D) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | (| | | |

01/06/2021 Common Stock 9,527 (1) 27,966⁽²⁾ D М Α **S**⁽³⁾ Common Stock 01/06/2021 3,484 D \$53.34 24,482 D 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 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 | | | | |
| Restricted Stock Units | (4) | 01/06/2021 | | М | | | 9,527 | (5) | (5) | Common Stock | 9,527 | \$0.00 | 28,583 | D | |

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

2. Includes 3,653 shares of the Issuer's common stock acquired by the reporting person on November 13, 2020 pursuant to an employee stock purchase program.

3. The sales reported in this Form 4 were made to cover the tax obligation that occurred upon the vesting of restricted stock units.

4. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

5. The restricted stock units vest in four equal annual installments beginning January 6, 2021.

Remarks:

/s/ Austin D. Kim, Attorney-in-01/08/2021

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.