FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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

1. Name and Address of Reporting Person*  SOLAND DANIEL B  (Last) (First) (Middle)  3611 VALLEY CENTRE DRIVE, SUITE 300  (Street)  SAN DIEGO CA 92130						2. Issuer Name and Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC ACAD  3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018  4. If Amendment, Date of Original Filed (Month/Day/Year)										Relationship of Reporting Person(s) to Issuer eck all applicable)  X Director 10% Owner Officer (give title below)  Odividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				er ecify cable
(City)	(St		Zip)																	
1. Title of Security (Instr. 3)				2. Transa Date	2. Transaction Date		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.					(A) or	5. Amount of 4 and Securities Beneficially Owned Followi		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Nature Indirect neficial vnership
								Code	v	Amount		(A) or (D)	Price	;	Reported Transaction(s) (Instr. 3 and 4)			(Ins	str. 4)	
Common Stock				03/01	1/2018				P		2,000		A	\$23	3.02		2,000	D		
Common Stock				03/01	/2018				P		3,000		A	\$24	4.09		5,000	D		
Common Stock				03/01	/2018				P		2,000		A	\$24	\$24.52		7,000			
Common Stock				03/02	2/2018				P		3,000	00 A \$		\$22	2.52	10,000		D		
		Та	ıble II - I )								sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (I 8)		of Deriv	r osed ) r. 3, 4	6. Date E Expiratio (Month/E	n Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amour or Numbe of Title Shares		ount	Deriv Secu	Price of erivative ecurity 1str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ip of I Bei ) Ow ct (Ins	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercisa				Expiration Date							

**Explanation of Responses:** 

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

<u>Fact</u>

\*\* Signature of Reporting Person

03/02/2018

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.