FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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* <u>Hacksell Uli</u>					A	2. Issuer Name and Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC [ACAD]								(Check all applicable) X Director		cable) r	10% Owner	
(Last) (First) (Middle) 3911 SORRENTO VALLEY BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 08/13/2013								X	X Officer (give title below) Other (specify below) CEO					
(Street) SAN DII			92121 (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	Form fi	led by One	Filing (Check Reporting Pe	rson
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans		2. Transac	tion	2A. Deemed Execution Date,		3. 4. Securities			Acquired (A) or f (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect t Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock		08/13/2013				M		35,000	Α	\$1.	.08	35	35,000					
Common Stock		08/13/2013		3		M		17,771	Α	\$1.	\$1.08		52,771					
Common	ommon Stock 08/13		08/13/2	2013	13			G	V	52,771	D	\$	0	0		D		
Common Stock		08/13/2013		3		G	v	52,771	A	\$	\$0		1,820	I	By Family Trust			
Common Stock		08/13/2013		3		S ⁽¹⁾		52,771	D	\$20.1	20.1448 ⁽²⁾		109,049		By Family Trust			
		-	Γable Ι								posed of, , converti				wned			•
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Executity or Exercise (Month/Day/Year) if any		if any	tion Date, Trans		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)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		D	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amor or Numl of Share	ber				
Stock Option (right to buy)	\$1.08	08/13/2013			M			35,000	(3	3)	09/07/2013	Commo: Stock	ⁿ 35,0	000	\$0	0	D	
Stock Option (right to buy)	\$1.08	08/13/2013			M			17,771	(3	3)	09/07/2013	Commo	n 17,7	771	\$0	0	D	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person in 2012.
- 2. The price reported in Column 4 is a weighted-average price. These shares were sold in multiple transactions at prices ranging from \$19.80 to \$20.43 per share, inclusive. The reporting person undertakes to provide ACADIA Pharmaceuticals Inc., any security holder of ACADIA Pharmaceuticals Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the foregoing range.
- 3. Immediately.

/s/ Uli Hacksell

08/1<u>5/2013</u>

** 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.