FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

O IVID / (I	I I I O V/ L
OMB Number:	3235-0287
Estimated average	e burden

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

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
hours per response:	0.5						

1. Name and Address of Reporting Person* HARRIGAN EDMUND					<u>A(</u>	2. Issuer Name and Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC ACAD]									Check all a	pplicable) ector	g Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) 3611 VALLEY CENTRE DRIVE, SUITE 300)		3. Date of Earliest Transaction (Month/Day/Year) 08/16/2016										Officer (give title below)		Other (specify below)	
(Street) SAN DIEGO CA 92130						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(St	ate) (Zip)												Pe	rson			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4			nd Seci Ben Owr	nount of irities eficially ed Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code			v	Amount (A) (C)		A) or D)	Price	Tran	saction(s) r. 3 and 4)			(IIISU. 4)	
Common	Common Stock			08/16	6/2016				P		1,000) A \$		\$32	.97	1,000	Г)	
		Та									sed of, onvertib				y Owne	d			
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,		insaction de (Instr. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) de V (A) (D)		rative rities ired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares			8. Price of Derivative Security (Instr. 5)		Owr Forr Dire or Ir (I) (I	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

/s/ Elizabeth Carter, Attorneyin-Fact

08/18/2016

** 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.