ACADIA PHARMACEUTICALS INC

Form 4

September 21, 2007

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

Expires:

3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, 2005

0.5

Section 16. Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

burden hours per response...

10% Owner

Estimated average

OMB APPROVAL

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **Lundstrom Brian**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

(Middle)

(Zip)

ACADIA PHARMACEUTICALS INC [ACAD]

(Check all applicable)

(Last) (First) 3. Date of Earliest Transaction

Director

(Month/Day/Year) 09/20/2007

X_ Officer (give title Other (specify below) Sr. VP, Bus. Devt.

3911 SORRENTO VALLEY **BOULEVARD**

(Street)

(State)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

SAN DIEGO, CA 92121

(City)

(City)	(State)	Zip) Table	I - Non-Do	erivative (Securi	ities Acqu	iired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			d of (D)	Securities Ownership Beneficially Form: Direct Owned (D) or		7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	09/20/2007		M(1)	1,418	A	\$ 6.61	1,418	D	
Common Stock	09/20/2007		S <u>(1)</u>	1,318	D	\$ 16.08	100	D	
Common Stock	09/20/2007		S <u>(1)</u>	100	D	\$ 16.09	0	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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displays a currently valid OMB control number.

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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. Transacti Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	vative Expiration Date es (Month/Day/Year) ed		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 6.61	09/20/2007		M	1,418	<u>(2)</u>	11/23/2014	Common Stock	1,418

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Lundstrom Brian 3911 SORRENTO VALLEY BOULEVARD SAN DIEGO, CA 92121

Sr. VP, Bus. Devt.

Signatures

Brian

Lundstrom 09/21/2007

**Signature of Date

Reporting Person

Explanation of Responses:

- * 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).
- The transactions reported in this Form 4 were made pursuant to an automatic sales plan under Rule 10b5-1 of the Securities Exchange Act of 1934, as amended. The plan provides for the non-discretionary periodic sales of stock (and corresponding exercises of options, if needed) pursuant to predetermined trading parameters that do not permit Mr. Lundstrom to exercise any influence over how, when or whether to effect trades under the plan after its adoption.
- (2) 25% of the shares subject to the Stock Option vested and became exercisable on November 24, 2005. The remaining shares vest and become exercisable thereafter in 36 equal monthly installments.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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