Edgar Filing: Baity Glenn - Form 4

Baity Glenn											
Form 4	_										
April 03, 201	3										
FORM	$ 4 _{\mathrm{UNITEL}}$) статр	SECUD	TTIES A		TT A N		COMMISSION	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION						_01v11v1155101N	OMB Number:	3235-0287			
Check this		washington, D.C. 20549								January 31,	
if no longer subject to STATEMENT OF CH				ANGES IN BENEFICIAL OW				NERSHIP OF	Expires:	2005	
	Subject to STATEMENT OF CHART				ITIES				Estimated a burden hou		
Form 4 or									response	•	
Form 5 obligation	· ·						•	e Act of 1934,			
may conti	nue. Section 17			•				f 1935 or Section	n		
See Instru 1(b).	ction	50(II)	of the In	vestment	Company	Act	01 194	+0			
1(0).											
(Print or Type R	esponses)										
		- *								<i>.</i>	
1. Name and Ad Baity Glenn	ddress of Reportin	g Person <u>*</u>		2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			-	Symbol ACADIA PHARMACEUTICALS							
			INC [A		MACEUI	ICA	LS	(Check all applicable)			
(Lest)	(Einst)	(MGddla)	-	-				Director	100	Owner	
(Mor				 Date of Earliest Transaction Month/Day/Year) 04/02/2013 				Director 10% Owner Officer (give title Other (specify below) VP AND GC			
	(Streat)				01					(61 1	
				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
Thed(Mo				Inn/Day/Tear)				_X_Form filed by One Reporting Person			
SAN DIEGO	D, CA 92121							Form filed by M Person	Iore than One Re	eporting	
(City)	(State)	(Zip)									
	(State)	(24)	Table					uired, Disposed of		•	
1.Title of Security	2. Transaction Day/Yea	med 3. 4. Securities Acquired on Date, if Transaction(A) or Disposed of Code (D)				-	5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	(Wolth/Day/Tea					01	Beneficially	(D) or	Beneficial		
		(Month/	Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			Owned	Indirect (I)	Ownership			
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	04/02/2013			S <u>(1)</u>	13,163	D	\$8	40,000 (2)	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
Baity Glenn 3911 SORRENTO V SAN DIEGO, CA 92				VP AND GC					
Signatures									
/s/ Glenn F. Baity	04/03/201	3							
<u>**</u> Signature of Reporting Person	Date								

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).
- (1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person in March 2012.
- (2) Includes 10,000 shares acquired on November 30, 2012 by Mr. Baity under the ACADIA Pharmaceuticals Employee Stock Purchase Plan.

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.