# Wells William McDowall Form 3 January 31, 2012 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 30(h) of the Investment Company Act of 1940

#### OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Wells William McDowall			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ACADIA PHARMACEUTICALS INC [ACAD]			
(Last)	(First)	(Middle)	01/27/2012	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O ACADIA PHARMACEUTICALS				(Check all applicable)			

#### C/O ACADIA PHARMACEUTICALS INC., 3911 SORRENTO VALLEY BLVD.

(Street)

# SAN DIEGO, CAÂ 92121

(City)	(State)	(Zip
1.Title of Secu	rity	

(Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned

10% Owner

\_ Other

Director

Officer

(give title below) (specify below)

2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)

SEC 1473 (7-02)

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Reporting Person

Person

6. Individual or Joint/Group

Filing(Check Applicable Line) \_X\_Form filed by One Reporting

Form filed by More than One

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date Exercisable	Expiration Date	Title	Amount or Number of	Security	Direct (D) or Indirect
2	2		Shares		(I)
					(Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships			
		Director	10% Owner	Officer	Other
Wells William McDowall C/O ACADIA PHARMACEUTICALS 3911 SORRENTO VALLEY BLVD. SAN DIEGO, CA 92121	INC.	Â	Â	Â	Â
Signatures					
/s/ Glenn F. Baity, Attorney-in-Fact	01/31/2	2012			
**Signature of Reporting Person	Date	e			

# **Explanation of Responses:**

### No securities are beneficially owned

\* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.