

ACADIA PHARMACEUTICALS INC  
Form 3  
August 26, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â NOMURA INTERNATIONAL PLC		(Month/Day/Year) 08/18/2005	ACADIA PHARMACEUTICALS INC [ACAD]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	
NOMURA HOUSE,Â 1 ST MARTIN'S-LE-GRAND			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street)			(Check all applicable)	
LONDON,Â X0Â EC1A 4NP			<input type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Other (give title below)    (specify below) <input type="checkbox"/> Member of 13G Group (1)	
(City)	(State)	(Zip)	6. Individual or Joint/Group Filing(Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock, par value \$0.0001 per share ("Common Stock")	2,199,010	I	Notes <u>(1)</u> <u>(2)</u>

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

SEC 1473 (7-02)

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

Edgar Filing: ACADIA PHARMACEUTICALS INC - Form 3

	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5) Notes <u>(1)</u> <u>(2)</u>
Warrant to purchase Common Stock	10/17/2005	04/20/2010	Common Stock	549,752	\$ 8.15	I	

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
NOMURA INTERNATIONAL PLC NOMURA HOUSE 1 ST MARTIN'S-LE-GRAND LONDON, X0 EC1A 4NP	Â	Â X	Â	Member of 13G Group (1)
Nomura Phase4 Ventures LTD NOMURA HOUSE 1 ST MARTIN'S-LE-GRAND LONDON, X0 EC1A 4NP	Â	Â X	Â	Member of 13G Group (1)
Nomura Phase4 Ventures GP LTD NOMURA HOUSE 1 ST MARTIN'S-LE-GRAND LONDON, X0 EC1A 4NP	Â	Â X	Â	Member of 13G Group (1)
Nomura Phase4 Ventures LP NOMURA HOUSE 1 ST MARTIN'S-LE-GRAND LONDON, X0 EC1A 4NP	Â	Â X	Â	Member of 13G Group (1)

## Signatures

See Exhibit 99.1 for signature information.

08/23/2005

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

\* 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).

(1) See Exhibit 99.1 for the identities of each Reporting Person and for a table of all shares beneficially owned directly or indirectly by each of the Reporting Persons.

(2) Directly owned by Nomura Phase4 Ventures LP.

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.