



Steve Davis, CEO

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This presentation contains forward-looking statements. These statements relate to future events and involve known and unknown risks, uncertainties and other factors which may cause our actual results, performance or achievements to be materially different from any future results, performances or achievements expressed or implied by the forward-looking statements. Each of these statements is based only on current information, assumptions and expectations that are inherently subject to change and involve a number of risks and uncertainties. Forward-looking statements include, but are not limited to, statements about (i) plans for, including timing and progress of commercialization of, NUPLAZID® or for the clinical development of our product candidates, including pimavanserin and trofinetide; (ii) benefits to be derived from and efficacy of our product candidates, including the use of pimavanserin in dementia-related psychosis, schizophrenia, depression or other neurological or psychiatric indications, potential advantages of NUPLAZID versus existing antipsychotics or antidepressants, and expansion opportunities for NUPLAZID; (iii) estimates regarding the prevalence of PD, PD Psychosis, dementia-related psychosis, schizophrenia or depression and the potential use of trofinetide in Rett syndrome; (iv) potential market for any of our products, including NUPLAZID and trofinetide; and (v) our estimates regarding our future financial performance, cash position or capital requirements.

In some cases, you can identify forward-looking statements by terms such as "may," "will," "should," "could," "would," "expects," "plans," "anticipates," "believes," "estimates," "projects," "predicts," "potential" and similar expressions (including the negative thereof) intended to identify forward-looking statements. Given the risks and uncertainties, you should not place undue reliance on these forward-looking statements. For a discussion of the risks and other factors that may cause our actual results, performance or achievements to differ, please refer to our annual report on Form 10-K for the year ended December 31, 2017 as well as our subsequent filings with the SEC. The forwardlooking statements contained herein are made as of the date hereof, and we undertake no obligation to update them for future events.





Our Vision

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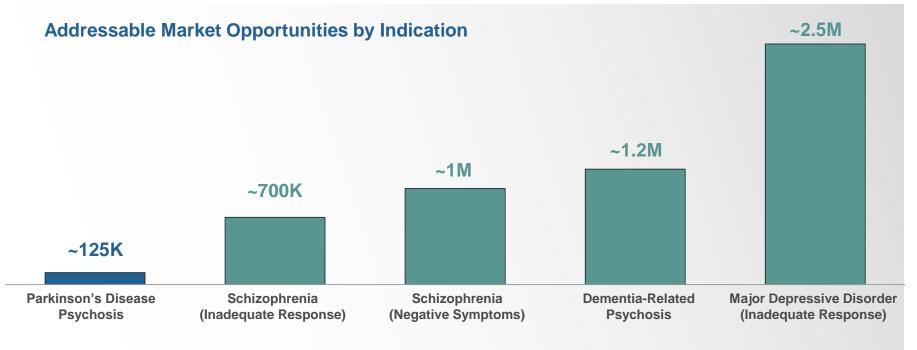
Become the leading pharmaceutical company dedicated to the advancement of innovative medicines that improve the lives of patients with CNS disorders

ACADIA Today

- NUPLAZID[®] the first and only FDA approved treatment for hallucinations and delusions associated with Parkinson's disease psychosis
- Highly innovative, late-stage clinical pipeline
 - 5 late-stage clinical programs addressing significant unmet needs in CNS
 - Breakthrough therapy designation in dementiarelated psychosis (DRP) for pimavanserin
 - Fast track status and Orphan Drug designation in Rett syndrome for trofinetide



NUPLAZID[®]/Pimavanserin: Significant Opportunities in Addition to PDP



PDP: ~125,000 patients currently receive some form of treatment for PDP; ACADIA market research.

Schizophrenia (Inadequate response): ~1% of adults in the U.S. have schizophrenia¹, ~30% inadequately respond to current therapies²

Schizophrenia (Negative symptoms): ~1% of adults in the U.S. have schizophrenia¹, studies suggest that ~40-50% of patients with schizophrenia experience prominent negative symptoms.

DRP: ~8 million patients in the U.S. have dementia, ~2.4 million have dementia-related psychosis; ~1.2 million are diagnosed with dementia-related psychosis³

MDD: ~2.5 million patients currently receive adjunctive therapy for MDD⁴

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¹According to National Institute of Mental Health; ²According to American Psychiatric Association; ³2017 Alzheimer's Disease Facts and Figures and ACADIA market research ⁴ IMS NSP, NPA, NDTI MAT-24 month data through Aug-2017; PLOS One, Characterization of Treatment Resistant Depression Episodes in a Cohort of Patients from a US Commercial Claims Database, Oct 2013, Vol 8, Issue 10. Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.



3 Strategic Pillars to Achieving our Vision







Grow...

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Expand...

...NUPLAZID[®] as the only approved treatment and standard of care for patients with Parkinson's disease psychosis

...the potential of pimavanserin by expanding to additional indications with significant unmet need ...our pipeline through focused business development in CNS disorders with high unmet need



NUPLAZID is approved in the U.S. for the hallucinations and delusions associated with Parkinson's disease psychosis Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.

Recent Highlights of Executing on our Strategy



ADVANCED NUPLAZID[®] AS THE STANDARD OF CARE IN PARKINSON'S DISEASE PSYCHOSIS

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PROGRESSED LATE-STAGE CLINICAL PIPELINE

EXPANDED LATE

STAGE PIPELINE

- Launched 34 mg capsule in 3Q18
- Launched branded DTC campaign in 4Q18
- Significant opportunity to help more patients with PDP
- Major Depressive Disorder (MDD): Positive results in Phase 2 CLARITY study; Phase 3 to initiate 1H19
- Dementia-Related Psychosis (DRP): Phase 3 HARMONY study progressing
- Schizophrenia: Phase 3 ENHANCE study in Inadequate Response and Phase 2 ADVANCE study in Negative Symptoms progressing

Acquired North American Rights to Trofinetide: Phase 3 study to initiate in Rett syndrome in 2H19



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NUPLAZID[®]: The First and Only Approved Treatment for PDP

NUPLAZID is a selective serotonin inverse agonist/antagonist, or SSIA

- Preferentially targets 5-HT_{2A} receptors
- Non-dopaminergic antipsychotic
- Demonstrated significant efficacy in reducing hallucinations and delusions of PDP
- 74% of patients experienced improvement in pivotal clinical study

Well-tolerated in clinical studies in PDP patients

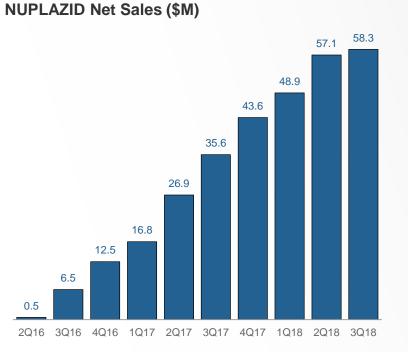
- No impairment of motor symptoms
- No increased sedation
- No weight gain
- No orthostatic hypotension
- No blood disorders





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NUPLAZID®: Significant Commercial Opportunity Ahead in PDP



Company converted to sell-in method from sell-through method in 2Q 2017. All revenues shown above are on a sell-in basis for consistency of presentation.

Revenue:

- 2018 NUPLAZID Revenue Guidance: \$220 \$225M
- 3Q18 Revenue of \$58.3M; +64% YoY growth

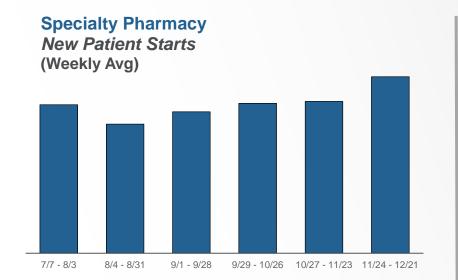
Market Opportunity:

- ~1 million people in the U.S. have Parkinson's disease
- ~50% will experience psychosis over the course of their disease
- ~125K patients currently treated for PDP*
- One study** showed over a six year period:
 - 24% of all hospitalizations for PD patients were for psychosis alone
 - Additional 25% of hospitalizations for motor and psychiatric complications



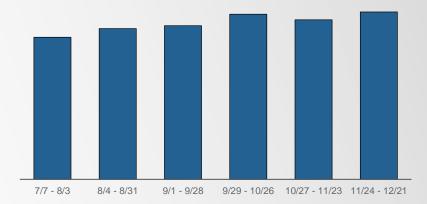
*ACADIA market research; **Klein C, Prokhorov T, Miniovitz A, et al. Admission of Parkinsonian patients to a neurological ward in a community hospital. J Neural Transm (Vienna). 2009;116(11):1509-1512 NUPLAZID is approved in the U.S for the hallucinations and delusions associated with Parkinson's disease psychosis. Provided January 9, 2019 as part of an oral presentation and is gualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.

NUPLAZID® Growth Trends by Channel



Weekly average new patient starts increasing

Long-Term Care (Specialty Distribution*) Total Bottles – Including Refills (Weekly Avg)



Continued growth in long-term care bottles



11 *Long-term care represents ~2/3 of our specialty distribution business

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NUPLAZID[®] Branded DTC Campaign: Raising Awareness Among Patients and Caregivers

IVING WITH ADVANCING PARKINSON'S

seeing things
 hearing things
believing things
that others don't

don't keep it in

AROUND 50% OF PEOPLE WITH PARKINSON'S MAY EXPERIENCE HALLUCINATIONS OR DELUSIONS DURING THE COURSE OF THEIR DISEASE.

Actor portrayal

NUPLAZID is the Only FDA Approved Medicine Proven to Reduce the Frequency and/or Severity of Hallucinations and Delusions Associated with Parkinson's Disease Psychosis



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Leverage...

Significant Opportunities with Late-Stage Pipeline

COMPOUND/ PROGRAM	INDICATION	IND-TRACK	PHASE 1	PHASE 2	PHASE 3	MARKETED
NUPLAZID [®] (pimavanserin)*	Hallucinations and Delusions Associated with PD Psychosis					
Pimavanserin	Dementia-Related Psychosis					
Pimavanserin	Schizophrenia Inadequate Response					
Pimavanserin	Major Depressive Disorder Inadequate Response					
Pimavanserin	Schizophrenia Negative Symptoms					
Trofinetide**	Rett Syndrome					

14 *NUPLAZID is approved in the U.S; **ACADIA has an exclusive license to develop and commercialize trofinetide in North America from Neuren Pharmaceuticals. Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.



Dementia-Related Psychosis (DRP)

HIGH UNMET NEED

No FDA approved treatment



People in the U.S. are diagnosed with DRP*

Serious consequences:

- Repeated hospital stays
- Earlier progression to nursing home
- More rapid progression of dementia
- Increased risk of morbidity and mortality

Current antipsychotics used off-label accelerate cognitive decline – equivalent to about one year of disease progression – and carry significant side effects**





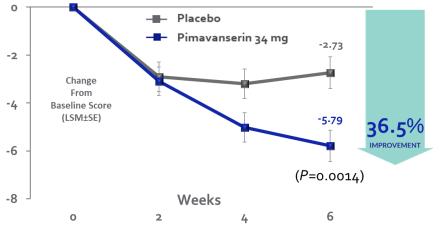
15 1 *2017 Alzheimer's Disease Facts and Figures and ACADIA market research

**Schneider LS, Tariot PN, Dagerman KS, et al, CATIE-AD Study Group. Effectiveness of atypical antipsychotic drugs in patients with Alzheimer's disease. N Engl J Med 2006; 355: 1525–38 Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.

Clinical Efficacy in Parkinson's Disease Psychosis and Alzheimer's Disease Psychosis Studies

Parkinson's Disease Psychosis, Phase 3 020 Study*

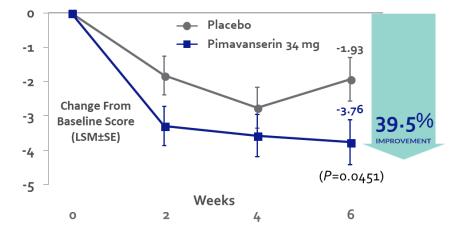
NUPLAZID 34 mg showed a 36.5% improvement in primary endpoint (Change in SAPS-PD score from baseline to Day 43) versus 18.5% for placebo



Note: ~25% of subjects enrolled in this 199 patient study met criteria for dementia with MMSE score <25. In this dementia subgroup, for the primary efficacy analysis at Day 43, a treatment difference of 5.71 points (p=0.0018) was observed with an effect size of 0.99.

Alzheimer's Disease Psychosis, Phase 2 019 Study**

Pimavanserin 34 mg showed a 39.5% improvement in primary endpoint (Change from baseline to Day 43 in the NPI-NH psychosis subscale) versus 19% for placebo

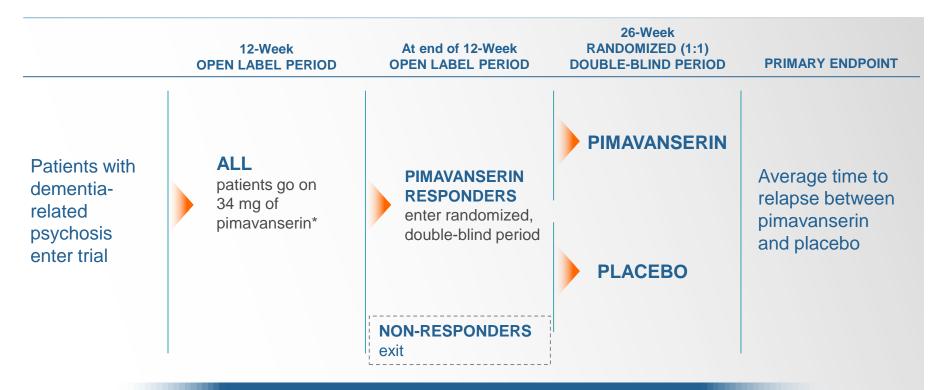




LSM: least-squares mean; SE: standard error

^{*}NUPLAZID Prescribing Information; Cummings J, et al. Lancet. 2014;383:533-540.; **Ballard C, et al. Lancet. 2018;17:213-222. NUPLAZID is approved in the U.S. for the hallucinations and delusions associated with Parkinson's disease psychosis. Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.

Phase 3 HARMONY Relapse Prevention Study Design



Interim Data Read-out in 2H19; Final Results in 2020



*Patients are able to reduce dose from 34 mg to 20 mg of pimavanserin in the first 4 weeks of open label period. Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.

Major Depressive Disorder (MDD) – Inadequate Response

HIGH UNMET NEED

Majority of patients with MDD do not respond to initial antidepressant therapy

~2.5M in U.S. treated with adjunctive therapy*

Based on market research, there is significant need for:

Greater efficacy

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- Faster speed of onset
- Treatment without sexual dysfunction
- Treatment without weight gain
- Treatment without daytime sleepiness
- Treatment without negative impact on motor function including rare but serious tardive dyskinesia

PHASE 2 CLARITY RESULTS

Pimavanserin was evaluated as an adjunctive treatment to SSRI/SNRI for treating MDD in a two-stage sequential parallel comparison design (SPCD)

- ✓ Primary endpoint achieved depression (HAMD-17^{**}) p=0.039
- Key secondary endpoint achieved disability (SDS**) *p*=0.004
 Positive results also observed on 7 additional pre-specified
- secondary endpoints (*p*<0.05)***
- ✓ Early efficacy (week 1) and sustained efficacy (week 10)
- Improvement in sexual function
- No meaningful weight gain
- Reduction in daytime sleepiness
- No motor function side effects observed

Pre-specified efficacy analysis: Weighted average of treatment difference from Stage 1 and Stage 2 of study

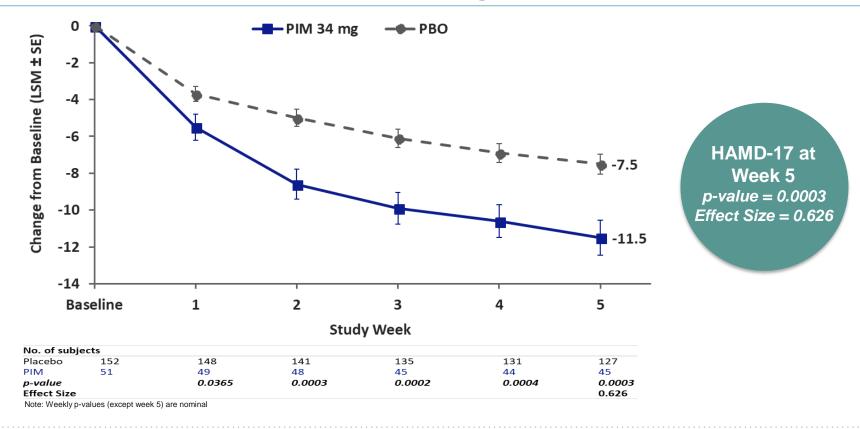


*IMS NSP, NPA, NDTI MAT-24 month data through Aug-2017; PLOS One, Characterization of Treatment Resistant Depression Episodes in a Cohort of Patients from a US Commercial Claims Database, Oct 2013, Vol 8, Issue 10.

HAMD-17: 17-item Hamilton Depression Rating Scale; SDS = Sheehan Disability Scale; * Additional secondary endpoints are nominal p-values.

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CLARITY: Pimavanserin Significantly Improved Patients' HAMD-17 Total Score vs. Placebo in Stage 1





Next Steps in MDD



Plan to meet with the FDA in early 2019



Given robust positive results, we believe the CLARITY study can serve as one of two pivotal trials required for sNDA submission



Initiate a Phase 3 Program in 1H19

Plan to initiate two Phase 3 parallel design, placebo-controlled trials in adjunctive MDD on top of baseline SSRI/SNRI therapy



Schizophrenia – Inadequate Response

HIGH UNMET NEED

No FDA-approved treatment

~1% of adults in the U.S. suffer from schizophrenia, a debilitating and lifelong condition*

Current Treatment Response



Polypharmacy of currently available antipsychotics may lead to:

- Increased side-effects
- Poor compliance

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Subsequent relapse

CLINICAL PROGRAM

Phase 2 data for pimavanserin in schizophrenia trial supports potential adjunctive treatment effect***

Phase 3 ENHANCE Study

- ~380 patients with inadequate response to current antipsychotic treatment for schizophrenia
- Randomized 1:1 (6 weeks) on pimavanserin + background therapy vs. placebo + background therapy
- Start daily dose of 20 mg pimavanserin at baseline; flexible dosing (10 mg, 20 mg, or 34 mg) between weeks 1 and 3
- Primary endpoint change from baseline to week 6 on Positive and Negative Syndrome Scale (PANSS) total score
- Data expected mid-2019



*According to the National Institute of Mental Health; **According to the American Psychiatric Association ***Meltzer H, et al. Schizophrenia Research. 2012;141:144-152. Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update.

Schizophrenia – Negative Symptoms

HIGH UNMET NEED

No FDA-approved treatment



Schizophrenia patients suffer prominent negative symptoms*:

- Flat affect
- Loss of interest
- Emotional withdrawal
- Cognitive impairment

Current antipsychotics target positive symptoms with minimal effect on negative symptoms

Significant side-effect burden and poor compliance:

- Dramatic weight gain
- Blood disorders

Highly sedating

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- Cognitive impairment
- Motor symptoms

CLINICAL PROGRAM

Positive effect observed on PANSS negative symptom subscale when given in combination with low dose risperidone**

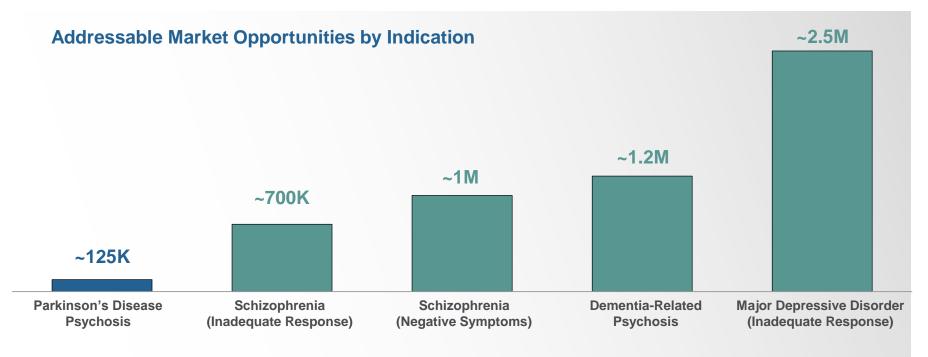
Phase 2 ADVANCE Study

- ~380 patients with predominant negative symptoms of schizophrenia while on adequate treatment with an antipsychotic
- Randomized 1:1 for 26 weeks on pimavanserin + background therapy vs. placebo + background therapy
- Start daily dose of 20 mg pimavanserin at baseline; flexible dosing (10 mg, 20 mg, or 34 mg) between weeks 2 and 8
- **Primary endpoint –** change from baseline to week 26 in the Negative Symptom Assessment-16 (NSA-16) total score
- Expect to complete enrollment in 2H19



*Studies suggest ~40-50%; Patel et al. 2015, Haro et al., 2015, Bobes et al. 2010, and Chue and Lalonde, 2014. **Meltzer H, et al. Schizophrenia Research. 2012;141:144-152. Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update

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Disciplined Business Development Strategy

Focus on CNS disorders with high unmet need

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Leverage our highly talented CNS focused R&D organization, commercial organization and field team



Proven Execution: License agreement for North American rights for trofinetide completed 3Q18; Program advancing to Phase 3 initiation 2H19



Rett Syndrome

Rett syndrome is caused by mutations on the X chromosome on the MeCP2 gene:

- Debilitating neurologic rare disease
- 6,000 to 9,000 patients in the U.S.*
- No FDA-approved treatment
- Primarily occurs in females causing problems in brain function with rapid decline between 6 and 18 months of age and can have the following symptoms:
 - Cognitive, sensory, emotional, motor impairment
 - Loss of independence
 - Loss of purposeful hand use
 - Loss of spoken communication





*According to the National Institutes of Health – National Institute of Neurological Disorders and Stroke Provided January 9, 2019 as part of an oral presentation and is qualified by such, contains forward-looking statements, actual results may vary materially; ACADIA disclaims any duty to update

Trofinetide Clinical Program: Rett Syndrome

Trofinetide

Trofinetide is a novel synthetic analog of the amino-terminal tripeptide of IGF-1

Designed to treat the core symptoms of Rett syndrome by reducing neuroinflammation and supporting synaptic function

Phase 2 study:

 Statistically significant improvements in RSBQ*(*p-value* = 0.042) and CGI-I* (*p-value* = 0.029) in girls 5 – 15 years of age

PHASE 3 STUDY

- Plan to initiate Phase 3 study in 2H19
- ~180 girls with Rett syndrome
- Double-blind, placebo-controlled
- Co-primary endpoints: RSBQ and CGI-I
- With positive results, potential to submit NDA in 2021
- U.S. Fast Track Status
- Orphan Drug Designation in the U.S. and Europe for Rett syndrome



Clinical Milestones

COMPOUND/ PROGRAM	INDICATION	MILESTONE	EXPECTED TIMING
Pimavanserin	Major Depressive Disorder Inadequate Response	End of Phase 2 meeting with FDA & commence Phase 3 program	1H19
Pimavanserin	Schizophrenia Inadequate Response	Phase 3 ENHANCE results	Mid-2019
Pimavanserin	Dementia-Related Psychosis	Interim Phase 3 HARMONY results Final Phase 3 HARMONY results	2H19 2020
Pimavanserin	Schizophrenia Negative Symptoms	Complete enrollment in Phase 2 ADVANCE study	2H19
Trofinetide	Rett Syndrome	Phase 3 trial initiation	2H19



Committed to Executing on Our Key Priorities in 2019

Continue to grow NUPLAZID®

- Execute on our commercial initiatives to grow NUPLAZID in PDP

Leverage the potential of pimavanserin and advance trofinetide

- Five Phase 3 studies
- One Phase 2 study
- Two potential Phase 3 study read-outs

Strong balance sheet to advance our pipeline and the potential to expand through business development





Committed to improving lives of patients with CNS disorders and their caregivers

