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13 UNITED STATES DISTRICT COURT
14 SOUTHERN DISTRICT OF CALIFORNIA

15 CITY OF BIRMINGHAM RELIEF
16 AND RETIREMENT SYSTEM AND
17 OHIO CARPENTERS' PENSION
18 FUND, Individually and on Behalf of
19 All Others Similarly Situated,

20 Plaintiffs,

21 v.

22 ACADIA PHARMACEUTICALS
23 INC., STEPHEN R. DAVIS, and
24 SRDJAN (SERGE) R. STANKOVIC,

25 Defendants.

Case No. 3:21-CV-00762-WQH-NLS
CLASS ACTION

**REPLY MEMORANDUM OF POINTS
AND AUTHORITIES IN SUPPORT OF
DEFENDANTS' MOTION TO DISMISS
PLAINTIFFS' AMENDED CLASS
ACTION COMPLAINT FOR
VIOLATIONS OF THE FEDERAL
SECURITIES LAWS**

Date: June 9, 2022
Courtroom: 14B
Judge: Hon. William Q. Hayes

Oral Argument Requested

Demand for Jury Trial

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I. INTRODUCTION

The Opposition makes one thing clear: Plaintiffs’ theory of securities fraud in this case hinges entirely on two conclusory claims—*i.e.*, (1) that Defendants touted a fictitious agreement between Acadia and the FDA, and (2) that they knew all along that Acadia’s Supplemental New Drug Application (“sNDA”) was doomed to failure. To concoct this imagined theory, Plaintiffs work backward from the FDA’s denial of Acadia’s sNDA and, in lieu of particularized facts, fill in the gaps with their own speculation and guesswork. This is a classic example of pleading “fraud by hindsight”—which is not permitted under the law. Indeed, as the Ninth Circuit recently explained,

[p]harmaceutical companies often suffer setbacks in their clinical trials after earlier testing offered highly promising results. That is ***the nature of the industry***, and—without more—it ***does not necessarily mean that a pharmaceutical company committed securities fraud.***

In re Nektar Therapeutics Sec. Litig., 2022 WL 1573821, at *7 (9th Cir. May 19, 2022) (emphasis added).

Plaintiffs’ first argument is their most egregious attempt to plead fraud by hindsight. They conclude that Acadia never had an agreement with the FDA regarding the studies and data necessary to support ***submission*** of the sNDA because the FDA ultimately rejected it. (Opp. at 11–12 (declaring that the absence of any agreement “can be readily ***inferred*** from the FDA’s rejection of the sNDA”).) But the existence of an agreement with the FDA regarding HARMONY and the FDA’s ultimate denial of Acadia’s sNDA are not mutually exclusive. And there is nothing in the Amended Class Action Complaint (“CAC”) that allows for such an inference.

Plaintiffs’ second argument—that the FDA’s denial of Acadia’s sNDA was a *fait accompli*—is equally faulty. They plead no facts indicating that ***anyone*** believed Acadia’s clinical trial design and data were insufficient to support the sNDA, including the ***medical professionals*** to whom Acadia presented the full HARMONY data set. There are no internal documents, no confidential witnesses, not even a

1 skeptical analyst report predating the FDA’s denial of the sNDA. There is only the
 2 FDA’s decision and Plaintiffs speculating *afterward* that Defendants must have
 3 known the bad news was coming.

4 The securities laws do not permit fraud claims to be reverse engineered from
 5 bad news and a stock drop. That is all the CAC offers, so it should be dismissed.

6 **II. ARGUMENT**

7 **A. Plaintiffs Still Fail to Plead Falsity With Particularity.**

8 As set forth in Defendants’ Motion, the CAC fails to plead with particularity
 9 that any challenged statement was materially false or misleading *when made*. (Mot.
 10 at 15–18.) The Opposition does nothing to remedy this fatal flaw. Instead, Plaintiffs
 11 double down on their imagined omissions—*i.e.*, that (1) no agreement between
 12 Acadia and the FDA ever existed (Opp. at 10–13); and (2) the studies and data
 13 supporting the sNDA were so obviously deficient that it was certain to fail (*id.* at 13–
 14 16).¹ But there are no well-pled facts to support Plaintiffs’ conjecture.

15 **1. There are no facts supporting Plaintiffs’ conjecture about** 16 **Acadia’s “non-agreement” with the FDA.**

17 According to Plaintiffs, Defendants’ arguments “require[] this Court to assume
 18 that the FDA entered into an agreement that the FDA then reneged on” and that “the
 19 FDA double-crossed them.” (Opp. at 1, 2.) This is a strawman; Defendants’ Motion
 20 requires no such assumptions. Plaintiffs cite no facts (because there are none) to
 21 support their manufactured theory that Acadia never had an agreement with the FDA.
 22 Rather, they admit their conclusion is based solely on “the FDA’s rejection of the
 23 sNDA.” (Opp. at 11–12.) That is pure hindsight, and it pervades all of Plaintiffs’
 24 falsity arguments.²

25 ¹ Plaintiffs repeat these claims as support for scienter. (*See* Section II.B, *infra*.)

26 ² (*See* Opp. at 14 (Defendants’ statements regarding HARMONY’s results “must also
 27 be analyzed against the backdrop of Defendants’ false claims the FDA ‘agreed’ that
 28 it could support an sNDA for expanded DRP indications”); *id.* (if statements were
 “not materially misleading standing alone, they were plainly misleading in the
 context of Defendants’ statements about a purported FDA agreement”).)

1 First, Plaintiffs mischaracterize Acadia’s agreement with the FDA. They
 2 surmise that the FDA “*never* agreed that a single study that was able to report positive
 3 ‘aggregate’ results in DRP patients would support an expanded sNDA if (as in
 4 HARMONY) the data failed to also demonstrate positive results in the non-
 5 Parkinson’s patients or any sub-group thereof.” (Opp. at 6.) But Defendants never
 6 claimed that HARMONY would suffice to gain **approval** of its sNDA regardless of
 7 the study’s results. Defendants stated only that the FDA had agreed that HARMONY
 8 could support **submission** of the sNDA *if* its results “were both statistically and
 9 clinically very persuasive.” (Mot. at 19.)³

10 Second, Plaintiffs insist that Defendants must have been lying because the
 11 FDA would not “reneg[.]” on its agreement or “double-cross[.]” Acadia by rejecting
 12 its application. (Opp. at 2, 12.) But, again, Defendants **never** claimed the FDA was
 13 obligated to **approve** the sNDA because it had an agreement with the Company
 14 regarding HARMONY’s protocol. Indeed, such a claim would be counter to explicit
 15 guidance, reserving the FDA’s right to approve or reject **any** NDA. (See Mot. at 20.)
 16 In short, Plaintiffs’ argument is just another example of pleading fraud by hindsight.
 17 See *In re Nektar*, 2022 WL 1573821, at *1 (“Experimental drug candidates do not
 18 always live up to their potential, . . . [but] that does not mean that a pharmaceutical
 19 company has defrauded the investing public.”).

20 Third, the Opposition relies on authorities that are easily distinguished from
 21 the facts in this case. (Opp. at 11–12 (citing *In re MannKind Sec. Actions*, 835 F.
 22 Supp. 2d 797 (C.D. Cal. 2011); and *Skiadas v. Acer Therapeutics, Inc.*, 2020 WL
 23 3268495 (S.D.N.Y. June 16, 2020)).) In *MannKind*, the company met with the FDA

24 ³ Plaintiffs also fail to plead why a failure to demonstrate efficacy against any specific
 25 subtypes of dementia would have been **material** to investors. *Retail Wholesale &*
 26 *Dep’t Store Union Loc. 338 Ret. Fund v. Hewlett-Packard Co.*, 845 F.3d 1268, 1274
 27 (9th Cir. 2017). Which dementia subtypes did investors care most (or at all) about?
 28 What showing of efficacy, with respect to which subtypes, did investors hope to see?
 “We cannot answer any of these questions because the complaint has failed to plead
 sufficient facts to provide context that would allow us to assess the alleged falsity”
 of Defendants’ statements. *Nektar*, 2022 WL 1573821, at *6.

1 *after* starting its one-and-only clinical trial of a new insulin delivery system. 835 F.
 2 Supp. at 801. The defendants stated, contrary to certain well-pled facts, that their
 3 study had been verbally “blessed” and “vetted” by the FDA; that their study was
 4 designed based on FDA recommendations; and that the FDA had accepted previous
 5 studies as supportive, which had used a wholly different delivery system. *Id.* at 802–
 6 03. In *Skiadas*, a company sought FDA approval of a drug by shopping for a
 7 *retrospective* clinical trial—a practice the FDA regards as a “red flag”—rather than
 8 conducting its *own* clinical trials. 2020 WL 3268495 at *3–4. And the company’s
 9 statements about what the FDA had verbally agreed to conspicuously *changed* during
 10 the class period. *Id.* at *4. On those very different facts, the *MannKind* and *Skiadas*
 11 courts found that plaintiffs had plausibly alleged that no *verbal* agreement with the
 12 FDA ever existed.

13 No such facts are alleged in this case, where (1) Acadia met with the FDA
 14 regarding HARMONY and their planned sNDA *before* the trial began (CAC ¶¶ 113,
 15 125, 128, 132, 135); (2) Defendants’ statements about Acadia’s discussions with the
 16 FDA reflected a process *specifically recommended by federal law* (Mot. at 19–20)⁴;
 17 and (3) Defendants stated that the FDA’s agreement was documented *in writing* in
 18 the minutes of its End-of-Phase II meeting (*id.*). Plaintiffs offer nothing, other than
 19 their own conjecture, to the contrary. Put simply, they have not met their burden to
 20 plead “particularized” facts in alleging falsity, and for this reason alone the CAC
 21 should be dismissed. *Curry v. Yelp Inc.*, 875 F.3d 1219, 1225 (9th Cir. 2017).

22 **2. No well-pled facts support Plaintiffs’ conjecture about**
 23 **“known design deficiencies” and certain failure of the sNDA.**

24 Plaintiffs argue that Defendants misled investors by “claim[ing] that the
 25 Company’s data showed that pimavanserin . . . was sufficient to support FDA
 26 approval of its sNDA to expand the drug’s existing treatment indications beyond
 27

28 ⁴ Plaintiffs abandon their misguided argument that the FDA would have had to
 rescind a Special Protocol Assessment to deny the sNDA. (¶¶ 99–103; Mot. at 20.)

1 Parkinson’s DRP” (Opp. at 6), while allegedly concealing “known design
2 deficiencies” and “insufficient” clinical trial data that “doom[ed] its chances for FDA
3 approval” (*id.* at 2, 21). This argument fails for several reasons.

4 First, Plaintiffs again mischaracterize the facts. They ignore the distinction
5 between studies or data sufficient to support (a) Acadia’s **submission** of the sNDA
6 versus (b) the FDA’s ultimate **approval** of the sNDA. To be sure, Defendants touted
7 what they regarded as pimavanserin’s “significant **potential**” to help a broad
8 population of patients and expressed “confiden[ce] . . . in [the drug’s] **potential** for
9 [FDA] approval.” (Mot. at 13.) But Defendants never promised investors that
10 Acadia’s studies would be enough for the FDA to **approve** the Company’s sNDA—
11 or even that approval was likely. On the contrary, Acadia consistently warned
12 investors that FDA approval was far from assured. (*Id.* at 5.)

13 Second, nothing about Acadia’s clinical trial designs or resultant data was
14 concealed. Investors had access to HARMONY’s entire dataset **because Acadia**
15 **publicly released that data**. Plaintiffs do not contest that these disclosures included
16 the design and results of the 019 and HARMONY studies, including itemized data
17 broken down by the five “most common clinically diagnosed subtypes of dementia”
18 evaluated in those studies. (See CAC ¶¶ 62, 74–77, 82–83, 87.⁵) Instead, they
19 conclude (without supporting facts) that these disclosures were insufficient to
20 “counter-balance” Defendants’ other supposed “one-sided representations.” (Opp. at
21 15; *see also* Section II.A., *supra*.) They do not, however, say **how or why** the
22 Company’s disclosures were insufficient; again, defaulting to their own supposition
23 (that no agreement with the FDA ever existed) as support. Incredibly, Plaintiffs
24 accuse Defendants of attempting to **conceal** HARMONY’s design and results from
25 investors, while at the same time **disclosing** the same information to **medical**

26
27 ⁵ Plaintiffs wrongly characterize Defendants’ argument as “just a form of the ‘truth-
28 on-the-market” defense. (Opp. at 14.) Not so. Defendants rely on, and take as true,
the allegations in the CAC, in which **Plaintiffs** claim that Acadia released
HARMONY’s full data set. (CAC ¶¶ 61–62.)

1 **professionals** (Opp. at 15), who are best positioned to identify any flaws or
 2 deficiencies in the study’s design and data. This is plainly not enough. *See In re Sona*
 3 *Nanotech, Inc. Sec. Litig.*, 2021 WL 5504758, at *7 (C.D. Cal. Oct. 28, 2021) (“A
 4 plaintiff is hard-pressed to build a fraud case from publicly disclosed information.”).

5 Third, the Opposition does not fix the CAC’s failure to allege with particularity
 6 that Acadia’s clinical studies and data were plainly insufficient⁶ to support the sNDA
 7 or that Defendants must have known their statements regarding HARMONY’s data
 8 were false. (Opp. at 3–5, 13–16.) The facts show precisely the opposite. Acadia
 9 announced on September 9, 2019, that HARMONY met its primary endpoint and, as
 10 Plaintiffs admit, pimavanserin increased the time to relapse for all except two
 11 dementia subtypes. (Opp. at 4.) After Acadia presented the full HARMONY dataset
 12 on December 4, 2019 (CAC ¶ 61–62), analysts characterized the results as “a clear
 13 win” for the Company, stating that the data “looked great on all key metrics.” (Ex.
 14 KK at 213.) Analysts also stated that HARMONY “showed strong initial response as
 15 well as relapse prevention with pima treatment across the subtypes.” (Ex. LL at 215.)
 16 They further expressed that HARMONY’s demonstrated reduction in risk of relapse
 17 of 65% “beat our expectations . . . by quite a margin,” *even after specifically*
 18 *addressing the relative underperformance of pimavanserin in treating some*
 19 *dementia subtypes*, and believed the study “demonstrate[ed] strong, clinically
 20 meaningful efficacy that should drive approval and commercial adoption.” (*Id.* at
 21 215, 217–18.) Here again, there are no facts alleged showing that **anyone** regarded
 22 HARMONY’s design or its data as flawed before the FDA rejected Acadia’s sNDA.
 23 The only plausible inference is that Defendants reasonably believed the clinical data
 24 was supportive of the sNDA.

25 Fourth, the Opposition relies on inapposite caselaw. (*See* Opp. at 13.) For
 26

27 ⁶ Plaintiffs cite **no authority** for their conclusory claim that Acadia’s studies and data
 28 were “threadbare science,” “statistically insignificant,” and insufficient to support an
 sNDA. (Opp. at 11.) “[C]onclusory adjectives do not meet the PSLRA’s heightened
 pleading requirements.” *Nektar*, 2022 WL 1573821 at *4–5.

1 example, in *Khoja v. Orexigen Therapeutics, Inc.*, the FDA specifically warned the
 2 defendant company that its early clinical trial results were unreliable and likely to
 3 change. 899 F.3d 988, 996 (9th Cir. 2018). As the trial continued, the results did in
 4 fact change for the worse. *Id.* at 1015. And, in *Schueneman v. Arena*
 5 *Pharmaceuticals, Inc.*, the company expressed confidence that its drug would be
 6 approved by the FDA, citing the company’s animal studies, without disclosing that
 7 one of those studies indicated the company’s drug caused cancer in rats. 840 F.3d
 8 698, 707 (2016). These cases held that defendants’ failure to disclose information
 9 they **knew** cast serious and obvious doubt on what they said publicly was sufficient
 10 to allege falsity. No such particularized factual allegations can be found in the CAC.

11 Fifth, it is undisputed that Defendants “never characterized . . . any particular
 12 dementia subgroups in HARMONY[]” because “[t]he very point of HARMONY was
 13 to support . . . an sNDA for authorizing pimavanserin to treat DRP writ large.” (Mot.
 14 at 17–18; Opp. at 16.) Plaintiffs cannot identify any challenged statement to the
 15 contrary because Defendants never made one. Rather, Defendants made clear to
 16 investors that HARMONY was **not** designed to target specific subgroups within
 17 DRP, and that the impact of the drug within subgroups was not a primary or
 18 secondary endpoint of the clinical trial. (Mot. at 16–18.)

19 Sixth, and finally, Plaintiffs cannot wish away application of the PSLRA safe
 20 harbor. They contend that, “even if some portions of the cited statements arguably
 21 had a forward-looking element, they are still actionable where they contain an
 22 actionable element of present or historical fact,” and Acadia’s accompanying risk
 23 disclosures were supposedly “boilerplate.” (Opp. at 20.) But Plaintiffs do not identify
 24 a single statement containing an “actionable element of present or historical fact.”
 25 And they do not even address the host of risk disclosures **specifically** warning
 26 investors about HARMONY, the Company’s engagement with the FDA, and FDA
 27 approval of pimavanserin for treatment of DRP. (Mot. at 14.)

28 At best, Plaintiffs allege a differing opinion as to the sufficiency of

1 HARMONY’s design and results—not the falsity of any statement by Defendants.

2 **B. Plaintiffs Still Fail to Plead a Strong Inference of Scienter.**

3 To adequately plead scienter, Plaintiffs must allege, “in great detail, facts that
4 constitute strong circumstantial evidence of deliberately reckless or conscious
5 misconduct.” *In re Silicon Graphics, Inc.*, 183 F.3d 970, 974 (9th Cir. 1999). The
6 CAC does not come close to clearing this high bar (*see* Mot. at 21), and nothing in
7 Plaintiffs’ Opposition alters this result. Plaintiffs argue that Defendants (1) were
8 motivated to defraud investors because of Acadia’s public offering and certain stock
9 sales; and (2) knowingly lied about an FDA agreement and the supposed flawed trial
10 design and data. (Opp. at 20–24.) Neither allegation is well pled.

11 **1. Acadia’s public offering and Defendants’ stock sales do not**
12 **support a strong inference of scienter.**

13 To start, Acadia’s September 2019 public offering is insufficient as a matter
14 of law to establish scienter in the Ninth Circuit. (*See* Mot. at 21–22.) Plaintiffs
15 characterize the timing of the offering as “patently suspicious,” presumably because
16 it followed an uptick in Acadia’s stock price following the September 9, 2019,
17 announcement that HARMONY had met its primary endpoint. But, as explained
18 above, Defendants never concealed anything about HARMONY, and there are no
19 facts alleged as to any individual Defendant’s state of mind, much less suggesting
20 that he intended to defraud investors via the stock offering.⁷

21 Mr. Davis’s and Mr. Stankovic’s individual stock sales are likewise
22 insufficient to support a strong inference of scienter. (Mot. at 22–23.) Plaintiffs still
23 fail to link any *particular* sale to any *specific* challenged statement. Moreover,
24 Plaintiffs argue that Mr. Stankovic “did not adopt any [10b5-1] plan until after the
25

26 ⁷ Notably, when Acadia disclosed HARMONY’s full dataset on December 5, 2019,
27 its stock price *increased* to \$50.48, a 14% rise from the day prior. (Ex. MM at 221.)
28 This belies Plaintiffs’ argument that Acadia’s presentation of the full data set at a
medical conference was insufficient to counter-balance Defendants’ other statements
about its clinical trials. (*See* Opp. at 15.)

Class Period had already started,” that “Davis sold . . . shares pursuant to an August 2019 plan adopted just two weeks before the Class Period started,” and that Mr. Davis sold all of his remaining shares after he adopted a new 10b5-1 plan in December 2019. (Opp. at 22–23.) But Plaintiffs make no allegation that the information disclosed by Acadia in September 2019 was available when Mr. Davis entered into his August 2019 10b5-1 plan, and his second 10b5-1 plan was entered into on December 19, 2019—*after* Acadia publicly released HARMONY’s full data set. (Ex. EE at 161.) Plaintiffs likewise make no attempt to link any of Mr. Stankovic’s sales to any challenged statement.⁸ Plaintiffs have simply failed to sufficiently allege that any of these stock sales were suspicious. (Mot. at 22.)

2. Acadia had no motive to lie about an FDA agreement or to knowingly mischaracterize its clinical trial data.

Unable to plausibly allege a motive for fraud, Plaintiffs default to their conclusory (and erroneous) allegations regarding the FDA agreement and the HARMONY clinical trial. But these arguments fail for the same reasons as presented above. (See Section II.A, *supra*.) Further, they make no sense. Plaintiffs do not explain *why* Defendants would lie about the FDA agreement and the Company’s clinical data, knowing they would eventually be found out when they submitted pimavanserin for approval. Plaintiffs ask this Court to believe that Defendants would pursue an outcome they *knew* to be impossible—one that would surely and severely damage Acadia—and that the Company would waste years of time and millions of dollars in the process. That theory “does not make a whole lot of sense” and “the PSLRA neither allows nor requires [courts] to check [their] disbelief at the door.” *Nguyen v. Endologix, Inc.*, 962 F.3d 405, 408, 415 (9th Cir. 2020).

⁸ Mr. Stankovic’s only sales prior to Acadia’s presentation of the full HARMONY data set in December 2019 were made to pay taxes on vested stock units. (Ex. FF.) These sales did not indicate scienter. *N. Collier Fire Control & Rescue Dist. Firefighter Pension Plan & Plymouth Cty. Ret. Ass’n v. MDC Partners, Inc.*, 2016 WL 5794774, at *20 (S.D.N.Y. Sept. 30, 2016) (“[T]he disposition of shares to pay taxes do[es] not demonstrate a defendant’s motive to defraud[.]”).

1 **C. Plaintiffs Still Fail to Adequately Plead Loss Causation.**

2 Plaintiffs admit that, to adequately plead loss causation, they must allege
3 “corrective disclosures by which ‘defendant’s fraud was revealed to the market and
4 caused the resulting losses.’” (Opp. at 24 (quoting *Grigsby v. BofI Holding, Inc.*, 979
5 F.3d 1198, 1205 (9th Cir. 2020).) But no such revelation of fraud ever occurred,
6 which Plaintiffs also admit. (See Opp. at 2 (describing March 8 as the date on which
7 “Defendants revealed that the FDA had rejected the sNDA for unspecified
8 ‘deficiencies,’” and describing April 5 as “when [Acadia] disclosed further details
9 regarding the bases for the FDA’s decision”).) So, what prior misstatement or untruth
10 was corrected by these disclosures? Plaintiffs do not (and cannot) say. *See Or. Pub.*
11 *Emps. Ret. Fund v. Apollo Grp.*, 774 F.3d 598, 608 (9th Cir. 2014) (plaintiffs failed
12 to plead loss causation because “[i]t is unclear what claims made by the Defendants
13 were invalidated” by alleged corrective disclosure).

14 Instead, Plaintiffs declare that the March and April 2019 disclosures “were
15 plainly construed by shocked investors as evidence” (i) that no FDA agreement had
16 ever existed, (ii) that Defendants’ statements about the sNDA’s supporting data were
17 “at best materially misleading,” and (iii) that Defendants had “misled investors as to
18 the true magnitude of the risk that the sNDA would be rejected.” (Opp. at 25.)
19 However, this is self-serving and made up; Plaintiffs provide **no** factual support for
20 these conclusions. Accordingly, they cannot meet their pleading burden by baldly
21 asserting that, **at the time** of the alleged corrective disclosures, investors “plainly
22 construed” Acadia’s announcements as Plaintiffs do now. *See Nektar Therapeutics*,
23 2022 WL 1573821, at *7 (“[Plaintiffs’] factual allegations most plausibly suggest
24 that relatively disappointing test results, not any revelation of earlier falsehoods,
25 caused [the company]’s share price to plunge.”).

26 **III. CONCLUSION**

27 For these reasons, as explained above and in Defendants’ Motion, the Court
28 should dismiss the CAC.

1
2 Dated: June 2, 2022

COOLEY LLP

3 /s/ Peter M. Adams

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