SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Add	1 6	R (1	. Date of Event Requiring Staten Month/Day/Year 2/20/2011		3. Issuer Name and Ticker or Trad Acadia Healthcare Com		<u>c.</u> [ACH	C]	
	(First) TAL PARTNE	í I			4. Relationship of Reporting Perso (Check all applicable) Director X	on(s) to Issue 10% Owne	er (Month/Day/Year)	ate of Original Filed
300 N. LASA	LLE STREET,	, SUITE 4900			Officer (give title below)	Other (spe below)		Applicable Line)	t/Group Filing (Check
(Street) CHICAGO	IL	60654							y One Reporting Person y More than One erson
(City)	(State)	(Zip)							
		т	able I - Non	-Derivat	ive Securities Beneficial	y 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	Common stock, par value \$0.01 per share				33,333	D			
		(e.g			e Securities Beneficially ints, options, convertible		s)		
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Securi Underlying Derivative Securi	ty (Instr. 4) Conve or Exe		rcise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiratio Date	n Title	Amount or Number of Shares	Price of Derivativ Security	Direct (D) e or Indirect (I) (Instr. 5)	

Explanation of Responses:

Remarks:

The reporting person is a member of a "group" with (i) Waud Capital Partners II, L.L.C. ("WCP II LLC"); (ii) Waud Capital Partners Management II, L.P. ("WCPM II"); (iii) Waud Capital Partners II, L.P. ("WCP II"); (iv) Waud Capital Partners QP II, L.P. ("WCP QP II"); (v) WCP FIF II (Acadia), L.P. ("WCP FIF II"); (vi) Waud Capital Affiliates II, L.L.C. ("Waud Affiliates II"); (vii) the Reeve B. Waud 2011 Family Trust; (viii) Waud Family Partners, L.P. ("WFP LP"); (ix) Waud Capital Partners III, L.L.C. ("WCP III LLC"); (x) Waud Capital Partners Management III, L.P. ("WCPM III"); (vii) Waud Capital Partners QP III, L.P. ("WCP QP II"); (xii) Waud Capital Partners III, L.P. ("WCP III LLC"); (x) Waud Capital Partners Management III, L.P. ("WCPM III"); (xii) Waud Capital Partners QP III, L.P. ("WCP QP III"); (xii) WCP FIF III (Acadia), L.P. ("WCP FIF III"); (xiv) Waud Capital Partners III, L.P. ("WCPM III"); (xii) Waud Capital Partners QP III, L.P. ("WCP QP III"); (xii) WCP FIF III (Acadia), L.P. ("WCP FIF III"); (xiv) Waud Capital Affiliates III, L.L.C. ("Waud Affiliates III"); (xi) Waud Capital Partners QP III, L.P. ("WCP QP III"); (xii) WCP QP III (Acadia), L.P. ("WCP FIF III"); (xiv) Waud Capital Affiliates III, L.L.C. ("Waud Affiliates III"); and (xv) Reeve B. Waud. WCPM II is the general partner of WCP QP III and the Manager of Waud Affiliates II. WCP II LLC is the general partner of WCPM III is the general partner of WCP III und the Manager of Waud Affiliates III. WCP III LLC is the general partner of WCPM III is the general partner of WCPM III (B) the manager of WCP III LLC is the general partner of WCPM III. (B) the manager of WCP III LLC (C) the investment advisor of the Reeve B. Waud 2011 Family Trust and (D) the general partner of WCP III LLC and WCP III LLC, (C) the investment advisor of the Reeve B. Waud 2011 Family Trust and (D) the general partner of WCP III LLC and WCP III LLC, (C) th

V. Waud	issa	Mel	/s/
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07/17/2013

** Signature of Reporting Person Date

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

* 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.

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 Number.