Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C	20549
vasilington,	D.C.	20049

STATEMENT	OF	<b>CHANGES</b>	IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per respons	e: 0.5								

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 Address of Reporting Person*  GRIECO WILLIAM					2. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ ACHC ]										tionship of Reportin all applicable) Director		ng Person(s) to Is: 10% Ov		
(Last) 6100 TO	(Fi	est) (F	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/07/2022									Office below	er (give title v)		Other ( below)	specify
(Street) FRANK (City)		ate) (Ž	7067 Zip)	on-Derivs		4. If Amendment, Date of Original Filed (Month/Day/Year)						L	ine) X	Form Form Perso		e Rep	orting Pers	on	
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)			on 2A. Deemed Execution Date,		3. 4. Securities		Acquired (A) or f (D) (Instr. 3, 4 and		j	5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) or (D)	Price			ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock 09/07/20			022				S		5,000	D	\$82.5	54 <sup>(1)</sup>	7.	3,811		D			
		Tal	ble II								osed of, convertib				Owne	d 			
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		4. Transa Code ( 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			ation D h/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		Deri Sec (Ins	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$81.91 to \$83.49, inclusive. The reporting person undertakes to provide to Acadia Healthcare Company, Inc. (Acadia), any security holder of Acadia, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

## Remarks:

/s/ Christopher L. Howard as Attorney in Fact for William

09/09/2022

**Grieco** 

\*\* 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 4 (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.