FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL										
	OMB Number:	3235-02									
- 1											

87 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* GOLDBERG RANDALL P						2. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC]										k all applic Directo	able) r	g Pers	10% Ow	ner	
(Last) 6100 TO	(F WER CIRC		3. Date of Earliest Transaction (Month/Day/Year) 03/14/2017										below)	(give title of Busine	ss De	Other (s below) evlopment	pecify				
(Street) FRANKLIN TN 37067 (City) (State) (Zip)					-	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line) X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deriv	vativ	e Se	curitie	s A	cqu	ıired, C	Disp	osed o	f, or Be	nefi	cially	Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/I				ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		´	Transaction Disposed Code (Instr. 5)			ies Acquire Of (D) (Ins		and Securitie Benefici Owned I		s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount	(A) or (D)	r Pı	rice	Reported Transact (Instr. 3 a	tion(s)			(11150.4)	
Common Stock 03/14/					4/201	/2017				Α		2,500 ⁽	2,500 ⁽¹⁾ A		0.00	9,8	9,876		D		
		-	Table II -									sed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		of		Exp	6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)] [B. Price of Derivative Gecurity Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		Expiration Date	Title	Amo or Num of Sha	.						
Employee Stock Option (right to	\$42.77	03/14/2017			A		2,500		03/	14/2018 ⁽²	0	3/14/2027	Common Stock	2,5	500	\$0.00	2,500		D		

Explanation of Responses:

- 1. Shares will vest over a 4-year period in equal yearly installments beginning March 14, 2018.
- 2. The options will vest over a 4-year period in equal yearly installments beginning March 14, 2018.

Remarks:

/s/ Christopher L. Howard as Attorney in Fact for Randall P. 03/16/2017 Goldberg

** 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.