FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
notruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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

Name and Address of Reporting Person* Fincher Ronald Morgan (Last) (First) (Middle)					3. [Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC] Just of Earliest Transaction (Month/Day/Year)										k all app Dired Offic belo	olicable) ctor er (give title w)		Other below	Owner (specify v)	
ACADIA HEALTHCARE COMPANY, INC.					08	08/08/2016											Chief Operating Officer				
6100 TOWER CIRCLE, SUITE 1000																					
(Street) FRANKLIN TN 37067			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting								
(City)	(S	tate) (Zip)												Person					porting	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			rear)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, ·	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			l (A) or . 3, 4 and 5	Benefic		ties Fo cially (D I Following (I)		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount		(A) or (D)	Price		Transa	action(s) 3 and 4)			(3 4)		
Common Stock 08/08/2			08/08/20	16	6			S		8,80)	D	\$52.560	9(1)	12	120,780		D			
Common Stock																86,135 ⁽²⁾			I	See Footnote ⁽³⁾	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Generally or Exercise (Month/Day/Year) if any					ansaction of ode (Instr. Derivative			Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V (A) (D		(D)	Date Exercisal		Expiration le Date		Title	or Number of Shares								

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 \$52.50 to \$52.64, 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.
- 2. Mr. Fincher expressly disclaims beneficial ownership of the reported securities, except to the extent of his pecuniary interest therein.
- 3. By the Ras W. Fincher II Trust u/a/d 09/13/2011, the Morgan M. Fincher Trust u/a/d 09/13/2011 and the Cody C. Fincher Trust u/a/d 09/13/2011.

Remarks:

In connection with the merger of Acadia Healthcare Company, Inc. ("Acadia") and PHC, Inc., the reporting person entered into a stockholders agreement with Acadia and certain other stockholders. As a result, he may deemed to be a part of a "group" with such other stockholders. To the extent the reporting person is deemed a member of a group, he disclaims beneficial ownership of shares owned by other members of the group.

> /s/ Christopher L. Howard as Attorney in Fact for Ronald Morgan Fincher

08/10/2016

** 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.