FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average h	nurden								

0.5

hours per response:

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

							()				1 7									
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GRIECO WILLIAM					1	Acadia Heatthcare Company, Inc. [ACHC]									X Dir	ector		10% C	wner	
(Last)	(Fi	rst) (Middle)					st Trans	action (M	on (Month/Day/Year)						cer (give title ow)		Other below)	specify	
ACADIA HEALTHCARE COMPANY, INC					05/.	05/23/2012														
830 CRESCENT CENTRE DRIVE, SUITE 610					4. If	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line) X Form filed by One Reporting Person						
FRANKI	LIN TN	N 3	37067 ————													m filed by Mo son	re than	One Rep	orting	
(City)	(St	ate) (Zip)																	
		Tabl	e I - Nor	n-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Bene	eficia	ally Owi	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			nd Secu Bene	nount of rities ficially ed Following	Form: (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Tran	saction(s) . 3 and 4)			(Instr. 4)	
Common Stock 05/23					/2012						4,920 ⁽¹⁾ A		\$	0	56,943		D			
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year		9	7. Title and Amount of Securities Underlying Derivative Security (Instrant 4)		str. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ov Fo Dii or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber res						

Explanation of Responses:

1. The shares will vest in three equal annual installments beginning May 23, 2013.

<u>/s/ William Grieco</u>

05/25/2012

** 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.