FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per resp	onse: 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* SWINSON ROBERT WALTON			2. Date of Event Requiring Statement (Month/Day/Year) 11/01/2011 3. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC]							
(Last) (First) (Middle) ACADIA HEALTHCARE COMPANY, INC.		` ′			4. Relationship of Reporting Perso (Check all applicable) Director X	10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)		
830 CRESCENT CENTRE DRIVE, SUITE 610		DRIVE, SUITE			Officer (give title below)	Other (spe below)	1 6	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) FRANKLIN	TN	37067						Form filed b Reporting P	y More than One erson	
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4) Form: Direct or Indirect (I (Instr. 5)		t (D) (Instr. 5)				
Common stock, par value \$0.01 per share					111,388	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Securit		4. Conversion Exercise Price of		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security			

Explanation of Responses:

Remarks:

In connection with the merger of Acadia Healthcare Company, Inc. ("Acadia") and PHC, Inc., Mr. Swinson 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 Mr. Swinson is deemed a member of a group, he disclaims beneficial ownership of shares owned by other members of the group.

<u>/s/ Robert Swinson</u> <u>11/01/2011</u>

** 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.