SEC Form 4	1
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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

OMB APPROVAL

-	-								
OMB Number:	3235-0287								
Estimated average burden									
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STATEMENT O	F CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>
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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

1	ess of Reporting Pers	son <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol Acadia Healthcare Company, Inc. ACHC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Howard Christopher L					Director	10% Owner			
				Х	Officer (give title	Other (specify			
(Last)	(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)		below)	below)			
		1000	02/21/2023		EVP, GC and S	ecretary			
6100 TOWER CIRCLE, SUITE 1000		1000							
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applica Line)					
FRANKLIN	TN	37067		X	Form filed by One Rep	orting Person			
					Form filed by More that	in One Reporting			
(City)	(State)	(Zip)			Person				

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction		4. Securities A Disposed Of ( 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)		
Common Stock	02/21/2023		A		201,003 <sup>(1)</sup>	Α	\$0.00	357,252	D	
Common Stock	02/21/2023		A		6,224 <sup>(2)</sup>	Α	\$0.00	363,476	D	
Common Stock	02/21/2023		F		78,823	D	\$80.87	284,653	D	
Common Stock								78,511 <sup>(3)</sup>	Ι	See Footnote <sup>(4)</sup>

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(c.g., puts, cuits, 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/Year)	4. Transa Code ( 8)		of Deriv Secu Acqu (A) o Disp of (D	r osed ) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	Deriv	unt of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## Explanation of Responses:

1. Shares received upon vesting of performance vesting restricted stock units awarded on March 24, 2020.

2. Shares earned based on 2022 performance under performance vesting restricted stock units awarded on April 11, 2022. The shares will not be issued until the end of the three-year period under the restricted stock unit award.

3. Mr. Howard expressly disclaims beneficial ownership of the reported securities, except to the extent of his pecuniary interest therein.

4. Includes 18,511 shares held by Christopher L. Howard Family Trust, 18,511 shares held by the Angie Parrott Howard Family Trust and 41,489 shares held by the reporting person's spouse.

/s/ Christopher L. Howard

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.

02/23/2023