SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| 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

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|---------------------------|---------|---------|--|--|-------------------------------|----------|-----------------------|--|--|
| 1. Name and Addre | 1 0 | 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) | | | | | |
| JACOBS JOEY A | | | | X | Director | Х | 10% Owner | | |
| (Last) (First) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) | x | Officer (give title below) | | Other (specify below) | | |
| 830 CRESCENT CENTRE DRIVE | | | 03/19/2012 | Chief Executive Officer | | | | | |
| SUITE 610 | | | | | | | | | |
| , | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | vidual or Joint/Group | Filing (| Check Applicable | | |
| (Street) | | | | Line) | | | | | |
| FRANKLIN | TN | 37067 | | X | Form filed by One | Report | ing Person | | |
| | | | | | Form filed by More Person | e than C | One Reporting | | |
| (City) | (State) | (Zip) | | 1 | | | | | |

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 Code (Instr. | | | | | 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) | | (1130. 4) | |
| Common Stock | 03/19/2012 | | Α | | 23,271 ⁽¹⁾ | Α | \$ <mark>0</mark> | 242,815 | D | | |
| Common Stock | | | | | | | | 1,184,623 ⁽²⁾ | Ι | 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) | 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) | | 5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and | ive ies ed ed nstr. | 6. Date Exercia Expiration Dat (Month/Day/Ye | e | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 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 | | | | |
| Employee Stock Option (right to buy) | \$15.96 | 03/19/2012 | | A | | 73,254 | | 03/19/2013 ⁽⁴⁾ | 03/19/2023 | Common Stock | 73,254 | \$0 | 73,254 | D | |

Explanation of Responses:

1. The shares will vest over a 4-year period in equal yearly installments beginning March 19, 2013.

2. Mr. Jacobs expressly disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.

3. By the Joey A. Jacobs 2011 Grantor Annuity Trust (Acadia).

4. The options will vest over a 4-year period in equal yearly installments beginning March 19, 2013.

/s/ Joey A. Jacobs

** Signature of Reporting Person

03/21/2012 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.