$\square$ 

(City)

# 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
Instruction 1(b).

(State)

(Zip)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

#### OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5

Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934		hours per response:		
	or Section 30(h) of the Investment Company Act of 1940				
1. Name and Address of Reporting Person <sup>*</sup> Graber Christopher J.	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Acadia Healthcare Company, Inc.</u> [ ACHC ]	5. Relationship of (Check all applica X Director	,		
(Last) (First) (Middle) WAUD CAPITAL PARTNERS, LLC	3. Date of Earliest Transaction (Month/Day/Year) 05/23/2012	Officer ( below)	(give title Other (s below)	pecify	
300 N. LASALLE STREET, SUITE 4900	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Jo Line)	dual or Joint/Group Filing (Check Applicable		
(Street)		X Form file	led by One Reporting Persor	n	
CHICAGO IL 60654		Form file	led by More than One Repor	rting	

### 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)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 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)		(1130.4)
Common Stock	05/23/2012		Α		6,150 <sup>(1)</sup>	Α	\$ <mark>0</mark>	6,150	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/Year)	4. Transa Code ( 8)		5. Nur of Deriv Secur Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exerc Expiration Da (Month/Day/)	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)	Ownership Form: Direct (D)	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. The shares will vest in three equal annual installments beginning May 23, 2013.

## /s/ Christopher L. Howard, by power of attorney

05/25/2012

Person

\*\* 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.