FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

UMB APPR	OVAL
OMB Number:	3235-0287
Estimated average but	rden
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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

1. Name and Address of Reporting Person*  PRINCE KAREN MARIE				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)  Director X 10% Owner						
(Last) 830 CRE	,	rst) ENTRE DRIVE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/19/2012									Officer below)	(give title		Other (s below)	specify		
SUITE 6	510				4. 1	f Ame	endment,	Date	of C	Original Fi	led	(Month/Da	y/Year)				loint/Group	Filing	(Check Ap	plicable	
(Street) FRANK	LIN TI	N	37067												Line	Form f	led by Mor		orting Perso One Repo		
(City)	(S	tate)	(Zip)		-											reisoi					
		Tab	le I - Nor	ո-Deri	vativ	e Se	curitie	s A	cqu	ıired, D	isp	osed o	f, or E	Ben	eficiall	y Owned	l				
1. Title of Security (Instr. 3)  2. Trans Date (Month/I				Execution Date,		<i>'</i>	Transaction Disposed (Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
										Code	,	Amount	(A	) or )	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 03/19			19/201	2				A		7,500	) <sup>(1)</sup> A		\$0	261	1,797		D				
		-	Гable II -									sed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise (Month/Day/Year) of ative		d Date, //Year)	4. Transactio Code (Inst				6. Date Exercisal Expiration Date (Month/Day/Year		Amour Securi Underl Deriva		Title and timount of Securities Inderlying Joerivative Security Instructive Security Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat	te ercisable		xpiration ate	Title	1	Amount or Number of Shares						
Employee Stock Option (right to	\$15.96	03/19/2012			A		7,500		03/	19/2013 <sup>(2)</sup>	0	3/19/2022	Comm Stock		7,500	\$0	7,500	)	D		

## **Explanation of Responses:**

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

04/06/2012 /s/ Karen Marie Prince

\*\* Signature of Reporting Person

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.