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## 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).

## 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

# OMB APPROVAL

OND NUMBER	3233-0201
Estimated average burd	len
hours per response:	0.5

1. Name and Address of Reporting Ferson		n*	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)				
<u>Rogers Hartley R.</u>			<u></u>	X	Director	10% Owner		
(Last) (First) (Middle) ACADIA HEALTHCARE COMPANY, INC. 830 CRESCENT CENTRE DRIVE, SUITE 610		ANY, INC.	3. Date of Earliest Transaction (Month/Day/Year) 05/21/2015		Officer (give title below)	Other (specify below)		
		E, SUITE 610	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applica Line)				
(Street)				X	Form filed by One Repo	orting Person		
FRANKLIN	TN	37067			Form filed by More than Person	One Reporting		
(City)	(State)	(Zip)						

#### 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)			4. Securities / Disposed Of ( 5)			Securities Beneficially	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)	ction(s)		
Common Stock	05/21/2015		Α		1,392(1)	Α	\$0.00	6,858	D	

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

	3	3				-									
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) or Dispo of (D) (Instr	5. Number of 6. Date Exercisable and Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative derivat Security (Instr. 5) Benefi Owned Follow Report Transa	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 will vest over a 3-year period in equal annual installments beginning May 21, 2016.

Remarks:

### <u>/s/ Christopher L. Howard as</u>

Attorney in Fact for Hartley R. 05/22/2015

Rogers

\*\* 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.