FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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hours per response	: 0.5							

	Check this box if no longer subject							
	to Section 16. Form 4 or Form 5							
$\cup$	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

Name and Address of Reporting Person*     GRIECO WILLIAM					2. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ ACHC ]									(Cr	eck all ap X Dired	,		erson(s) to I 10% Ov Other (s	vner	
(Last) (First) (Middle) 6100 TOWER CIRCLE, SUITE 1000					3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023										belov			below)	эреспу	
(Street)	LIN TN	1 3	7067		4. If Amendment, Date of Original Filed (Month/Day/Year)									Lin	e) <mark>X</mark> Forn Forn	,				
(City)	(St	ate) (Z	ip)		Rule 10b5-1(c) Transaction Indication															
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ended to								
		Table	l - No	n-Deriva	tive Se	ecur	ities	Acq	uired,	Dis	posed of	f, or	Ben	eficia	ally Owi	ned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				/Year)	Execu	Deemed cution Date, ly nth/Day/Year)				ies Acquired (A Of (D) (Instr. 3,				icially d	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		ted action(s) 3 and 4)	, ,				
Common	Stock			05/18/2	2023				A		2,229(1)	1) A \$0		\$0.0	76,040		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)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		d 4)	3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	Own Form Direct or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Expirati Exercisable Date		Expiration Date	Title	or Num of							

## Explanation of Responses:

1. Shares will vest over a 3-year period in equal annual installments beginning May 18, 2024.

## Remarks:

/s/ Christopher L. Howard as

Attorney in Fact for William 05/19/2023

Grieco

\*\* 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.