FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	OF CHAI	NGES IN B	ENEFICIAL	_ OWNERSHIP

	OMB APPRO	VAL
	OMB Number:	3235-0287
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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

Name and Address of Reporting Person* Petrie William M					2. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC]											ip of Reporting Person(s) to Is plicable) ctor 10% C				
(Last) (First) (Middle) ACADIA HEALTHCARE COMPANY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 05/21/2015										Office below	er (give title w)		Other (specify below)	
830 CRESCENT CENTRE DRIVE, SUITE 610				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)						
(Street) FRANKLIN TN 37067													X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate) (Zip)																	
		Tabl	e I - Noi	n-Deriv	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, o	r Ben	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution (Day/Year) if any		Deemed ecution Date, any onth/Day/Year)				ties Acquired (A) I Of (D) (Instr. 3,			and Secu Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)
Common Stock 05/21/					/2015				A		1,392	1)	A	\$ 0 .	\$0.00 10,647		Γ)		
	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 (Instr. 3) 3. Transaction Date Execution Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)			Date,		saction le (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	nt		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisal		Expiration Date	Title	of Sha	res						

Explanation of Responses:

1. Shares will vest over a 3-year period in equal annual installments beginning May 21, 2016.

Remarks:

/s/ Christopher L. Howard as

Attorney in Fact for William 05/22/2015

M. Petrie

** 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.