FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL				
	OMB Number:	3235-0287				
	Estimated average burd	en				
l	hours per response:	0.5				

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* JOEY A. JACOBS 2011 GRANTOR RETAINED ANNUITY TRUST (ACADIA)					3. D	Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC] Date of Earliest Transaction (Month/Day/Year) 12/24/2012									Check all ap Dire	ector cer (give title	Ü	10% C	wner (specify		
(Last) (First) (Middle)																					
		CARE COMPAN			4 If	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
830 CRE	SCENT CE	ENTRE DRIVE,	SUITE 6	10		4. II Americinent, Date of Original Fried (Month/Day/feat)									Line)						
(Street)															X Form filed by One Reporting Person Form filed by More than One Reporting						
l` ′	FRANKLIN TN 37067															Person					
(City)	(S	tate) (Zip)																		
		Tabl	e I - Nor	n-Deriva	ative	Se	curiti	es Acc	quired	Dis	posed o	f, o	r Ben	efici	ally Own	ed					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp Code (Instr. 5)		Disposed	urities Acquired (A) ed Of (D) (Instr. 3,			nd Secu Bene Owne	ficially ed Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)					
Common Stock 12/24/									S		39,92	927 D		\$2	1.6 878,519			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 Decurity or Exercise (Month/Day/Year) if any			Date, Transactio					6. Date E Expiration (Month/I		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, E	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
	Code		Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount nber ires									

Explanation of Responses:

Remarks:

In connection with the merger of Acadia Healthcare Company, Inc. ("Acadia") and PHC, Inc., the reporting person entered into a stockholders agreement with Acadia and certain other stockholders. As a result, he may deemed to be a part of a "group" with such other stockholders. To the extent the reporting person is deemed a member of a group, he disclaims beneficial ownership of shares owned by other members of the group.

> Joey A. Jacobs 2011 Grantor **Retained Annuity Trust** (Acadia), by /s/ Joey A. Jacobs.

12/27/2012

its trustee

** 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.