

POLSON JACK E
Form 3
October 31, 2011

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *

Â POLSON JACK E
(Last) (First) (Middle)

ACADIA HEALTHCARE
COMPANY, INC., Â 830
CRESCENT CENTRE DRIVE,
SUITE 610
(Street)

FRANKLIN, Â TN Â 37067
(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)
10/31/2011

3. Issuer Name and Ticker or Trading Symbol
Acadia Healthcare Company, Inc. [ACHC]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer Other
(give title below) (specify below)
Chief Financial Officer

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common stock, par value \$0.01 per share	292,452	I (1) (2)	Held directly by Acadia Healthcare Holdings, LLC

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date 3. Title and Amount of Securities Underlying 4. Conversion 5. Ownership 6. Nature of Indirect Beneficial Ownership

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(Month/Day/Year) Date Exercisable	Expiration Date	Derivative Security (Instr. 4) Title	Amount or Number of Shares	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
POLSON JACK E ACADIA HEALTHCARE COMPANY, INC. 830 CRESCENT CENTRE DRIVE, SUITE 610 FRANKLIN, TN 37067	Â	Â	Â	Chief Financial Officer Â

Signatures

/s/ Jack E. Polson 10/31/2011

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) Mr. Polson is an executive officer of Acadia Healthcare Holdings, LLC ("Holdings"). As a result, Mr. Polson may be deemed to have beneficial ownership of the reported securities.

Holdings will distribute shares of Acadia Healthcare Company, Inc. common stock to its members, which include Mr. Polson, in respect
- (2) of their ownership interests prior to the merger of Acadia Healthcare Company, Inc. and PHC, Inc. After such distribution, the reported shares will be owned of record by Mr. Polson.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.