Edgar Filing: Acadia Healthcare Company, Inc. - Form 4

Acadia Healthcare Company, Inc. Form 4 March 09, 2017

FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
if no lon	cor	MENT OF CHANCES IN DENEFICIAL OWN					IEDSIIID OF	Expires:	January 31, 2005			
subject t Section Form 4 o	16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP C SECURITIES							Estimated a burden hour response			
Form 5 obligations may continue.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 19401(b).30(h) of the Investment Company Act of 1940												
(Print or Type	Responses)											
GOLDBERG RANDALL P Sym				2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
				Healthca ²]	re Comp	any,	Inc.	(Check all applicable)				
(Mon				Date of Earliest Transaction onth/Day/Year)				Director 10% Owner X_ Officer (give title Other (specify below) below)				
6100 TOWER CIRCLE SUITE 1000 03/08				/08/2017				VP of Business Development				
				mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
							bre than One Reporting					
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. 4. Securities Acquired (A Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	03/08/2017			Code V S	Amount 914	(D) D	Price \$ 43.5466	(Instr. 3 and 4) 7,376	D			

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

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 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)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code of				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
Benc	ortina (Owners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
	Ū	Name / Address		I	Relationshi	ps					

Officer

VP of Business Development

Other

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GOLDBERG RANDALL P 6100 TOWER CIRCLE SUITE 1000 FRANKLIN, TN 37067

Signatures

/s/ Christopher L. Howard as Attorney in Fact for Randall P. Goldberg	03/09/2017
**Signature of Reporting Person	Date

Director 10% Owner

Explanation of Responses:

* 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. 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.