Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC]		
Bissell E	1 E. Perot (Month/Day/Year)			p	
(Last)	(First)	(Middle)	04/30/2013	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
ACADIA H	IFAL THC	ARF			

(Check all applicable)

(give title below) (specify below)

_X__ Director

Officer

10% Owner

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

Form filed by More than One

Person

Reporting Person

_ Other

COMPANY, INC., 830 CRESCENT CENTRE DRIVE, **SUITE 610**

(Street)

FRANKLIN, TNÂ 37067

Rer own

(City)	(State)	(Zip)	Table I - Non-Deriv	1-Derivative Securities Beneficially Owned			
1.Title of Secu (Instr. 4)	urity		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)		
Reminder: Rej owned directly			ass of securities beneficially	SEC 1473 (7-02	2)		
	Perso	ons who respond	t 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	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

1

2005

0.5

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships				
	Director	10% Owner	Officer	Other		
Bissell E. Perot ACADIA HEAI 830 CRESCENT FRANKLIN, T	ÂX	Â	Â	Â		
Signature	es					
/s/ E. Perot Bissell	05/16/2013					
<u>**</u> Signature of Reporting Person	Date					

Explanation of Responses:

No securities are beneficially owned

- * 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).

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.