Fincher Ronald Morgan Form 4 March 05, 2019

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per

response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and A Fincher Ron	2. Issuer Name and Ticker or Trading Symbol Acadia Healthcare Company, Inc. [ACHC]						5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
						ilic.					
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner X Officer (give title Other (specify			
6100 TOW 1000	02/24/2019						below) below) Chief Operating Officer				
	(Street)	mendment, Date Original Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
FRANKLIN							Form filed by More than One Reporting Person				
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)				4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	Indirect (I)		
				Code	V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	02/24/2019			F		249	D	\$ 27.7	76,713	D	
Common Stock	03/02/2019			F		600	D	\$ 30.41	76,113	D	
Common Stock									11,135 (1)	I	See Footnote

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

(2)

#### Edgar Filing: Fincher Ronald Morgan - Form 4

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title a	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	th/Day/Year) Execution Date, if		nNumber Expiration Da		ate	Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									mount		
						Date	Expiration Date	or Title Number of			
						Exercisable					
				C 1 W	(A) (D)						
				Code V	(A) (D)			S	hares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Fincher Ronald Morgan 6100 TOWER CIRCLE, SUITE 1000 FRANKLIN, TN 37067

Chief Operating Officer

## **Signatures**

/s/ Christopher L. Howard as Attorney in Fact for Ronald Morgan Fincher

03/05/2019

\*\*Signature of Reporting Person

Date

## **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).
- (1) Mr. Fincher expressly disclaims beneficial ownership of the reported securities, except to the extent of his pecuniary interest therein.
- (2) By the Ras W. Fincher II Trust u/a/d 09/13/2011, the Morgan M. Fincher Trust u/a/d 09/13/2011 and the Cody C. Fincher Trust u/a/d 09/13/2011.

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.

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