FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average burd	en							
	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* March Shayn P.							2. Issuer Name and Ticker or Trading Symbol GEO GROUP INC [GEO]									of Reporting P licable) or r (give title		10% Ov	vner		
(Last) (First) (Middle) 621 NW 53RD STREET SUITE 700						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2016									X Officer (give title Offier (specify below) VP of Finance and Treasurer						
(Street) BOCA RATON FL 33487							4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(City)																	Form filed by More than One Reporting Person				
		Та	ble I - No	n-Deriv	ative	e Se	curiti	es A	cquired	Dis	posed	of, or E	Bene	ficial	ly Owne	d					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Executio			Code	Transaction Disposed Code (Instr. 5)		rities Acq ed Of (D) (iired (/ nstr. 3	A) or , 4 and	Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)		Price	Report Transa (Instr. 3	ction(s)			(Instr. 4)					
Common Stock 03/01/3							2016		F		265 ⁽	265 ⁽¹⁾ D		\$29.2	4 13	13,038(2)		D			
Common Stock 03/02					2/2016	2016			F		337(1)]) [\$29.9	7 13	13,951 ⁽³⁾		D			
Restricted Stock													9,	,190(4)		D					
			Table II -						quired, [s, optio						Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercise Price of Derivative Security		Execution) if any	A. Deemed Execution Date, any Month/Day/Year) 4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date Am (Month/Day/Year) Sec Uni				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	or Nui of	mber ares							
Stock Options	\$13.72								03/23/201	13 0	3/23/2019	Commo Stock	5,	780		5,780		D			
Stock Options	\$18.23								10/28/201	.3 1	0/28/2019	Commo Stock	3,	468		3,468		D			
Stock	\$21.29		1						03/01/201	5 0	3/01/2021	Commo	n 5.	780		5,780		D			

Explanation of Responses:

- $1. \ These shares were surrendered in order to satisfy the reporting person's tax withholding obligation upon the vesting of restricted stock.\\$
- 2. The amount of shares has been adjusted to reflect the March 1, 2016 vesting of 1,000 shares of restricted stock.
- $3. \ The \ amount \ of \ shares \ has \ been \ adjusted \ to \ reflect \ the \ March \ 2, 2016 \ vesting \ of \ 1,250 \ shares \ of \ restricted \ stock.$
- 4. The amount of shares has been adjusted to reflect the March 1, 2016 vesting of 1,000 shares of restricted stock and the March 2, 2016 vesting of 1,250 shares of restricted stock.

Remarks:

/s/John J. Bulfin, as Attorneyin-Fact for Shayn P. March

03/03/2016

** 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.