FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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*  ZOLEY GEORGE C  (Last) (First) (Middle)  4955 TECHNOLOGY WAY														5. Relationship of Repo (Check all applicable) X Director			orting Person(s) to		
					3. Date of Earliest Transaction (Month/Day/Year) 06/15/2021										X Officer (give title below) Other (specify below)  Chairman & CEO				
(Street)	ATON FL	, 3	3431	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(St		Zip)											Perso					_
1. Title of Security (Instr. 3) 2. Transac Date		2. Transaction	2A. Deemed Execution Date,		3. Transaction Code (Instr.		Disposed of, or Benef 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5. Amount of Securities Beneficially Owned Following		t of s lly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	Code V		ount	(A) or (D)	) or ) Price		Reported Transaction(s) (Instr. 3 and 4)						
Common Stock		06/15/2021	-			P		16	6,644	A	\$6.745	2 <sup>(1)</sup>	3,000,000		D				
Restricted	d Stock													518,	752	Ι			
Common	ommon Stock													52,400		I I		By the Holly A. Meehan 2020 Trust <sup>(2)</sup>	
Common	Stock													52,450		I		By the Christopher N. Zoley Trust <sup>(2)</sup>	
		Tal	ble II - Derivati (e.g., pu	ve Se	ecuriti alls, w	ies A ⁄arra	cqui nts, c	red, C option	Disp	osed o	f, or E	Benefic securiti	iall es)	y Owne	d				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date ecurity or Exercise (Month/Day/Year) if any		Execution Date,	Transaction Code (Instr. 8)		5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5)	ative ities red sed 3, 4	Expirati	ion Da	Exercisable and on Date Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Derivative Security Instr. 5)	9. Numl derivati Securiti Benefic Owned Followi Reporte Transac (Instr. 4	ive ies ially ng ed ction(s)	10. Ownersl Form: Direct (E or Indire (I) (Instr.	Bene Owne ct (Instr	direct eficial ership
				Code	v	(A)		Date Exercis	able	Expiration Date	on Titl	or Numb of e Share							

## **Explanation of Responses:**

- 1. The price in Column 4 is a weighted average price. These shares were purchased in multiple open market transactions at prices ranging from \$6.685 to \$6.80, inclusive. The reporting person undertakes to provide to The GEO Group, Inc., any security holder of The GEO Group, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote to this Form 4.
- 2. Represents shares held by trust for the benefit of the reporting person's child. The reporting person's spouse is the trustee of the trust. The reporting person has no pecuniary interest or investment control over these shares.

## Remarks:

/s/Joe Negron, as Attorney-in-Fact for George C. Zoley
\*\* Signature of Reporting Person

06/17/2021

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.