FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549		
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OMB APPROVAL 3235-0287 OMB Number: Estimated average burden

0.5

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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* <u>DECONCINI DENNIS</u>							2. Issuer Name and Ticker or Trading Symbol CORRECTIONS CORP OF AMERICA CXW											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
																		Direc	ctor		10% O	wner		
(Last) (First) (Middle)								j										Officer (give title below)			Other (specify below)			
							3. Date of Earliest Transaction (Month/Day/Year)												,		,			
C/O CORRECTIONS CORP OF AMERICA						05/	05/20/2013																	
10 BURTON HILLS BLVD.					4 16	4. If Amondment, Date of Original Filed (Month/Day/Mass)												C. Individual or Jaint/Croup Filing (Cheek Assissable						
							4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NASHVI	TTD 5	ΓN	3	7215															X Form filed by One Reporting Person					
NASHVI	LLE .	LIN	3	1/215														Form filed by More than One Reporting						
(0:1)		<u> </u>		- · \													Person							
(City)	(State	e) (2	Zip)																				
			Tabl	e I - Nor	n-Deriv	ative	Se	curit	ies Ac	qui	ired, C	Disp	osed o	f, o	r Ben	efici	ally	Owne	ed					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution			, -	Transaction D		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and Securi			6. Owne Form: D	irect	7. Nature of Indirect			
					(Montn/I	Month/Day/Year)		if any (Month/Day/Year)			Code (Instr. 8)		5)					Owned Following (i)			o) or Indirect (Instr. 4)	Beneficial Ownership		
											Code	v	Amount		(A) or Price		Repo Trans		ction(s)			(Instr. 4)		
									_				_	(D) FIICE		- '		3 and 4)						
CXW Common Stock 05/20/							3				J ⁽¹⁾		1,801	L	A \$0		.00 17		',105 ⁽²⁾	D)			
			Ta	ble II - D	Perivat	ive S	есі	ıritie	Acqu	uire	d, Dis	ро	sed of,	or E	Benef	icial	y Oı	vned						
													nvertib											
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security	n C	3. Transaction Date Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of Dei Sec Ac (A) Dis of (of		Date Exe piration onth/Day	Date		Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	n: ct (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	(A)	(D)	Dat	ite ercisabl		Expiration Date	Titl	or Nu of	ount mber ares								

Explanation of Responses:

1. On May 20, 2013, the Issuer paid a special dividend to stockholders of record on April 19, 2013. As a result of the special dividend, the reporting person received 1801 shares of common stock on May 20, 2013.

2. Includes 2706 restricted stock units, each representing a contingent right to receive one share of issuer common stock on the anniversary date of grant (February 21, 2013).

Remarks:

Scott L. Craddock, Attorney in 05/22/2013

Fact

** 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.