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# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL										
OMB Number:	3235-0287									
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hours per response:	0.5									

1. Name and Address of Reporting Person <sup>*</sup> ANDREWS WILLIAM F		n*	2. Issuer Name and Ticker or Trading Symbol CORRECTIONS CORP OF AMERICA	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			CXW]	Х	Director	10% Owner		
s	Last) (First) (Middle) .409 MORAN ROAD				Officer (give title	Other (specify		
(Last) 1409 MORAN F			3. Date of Earliest Transaction (Month/Day/Year) 02/16/2007		below)	below)		
(Ctroot)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing (	Check Applicable		
(Street) FRANKLIN	TN	37069		X	Form filed by One Report	ing Person		
TRANCLIN	110	37003		Λ	Form filed by More than C	с -		
(City)	(State)	(Zip)			Person	Jilo r topolang		

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	if any			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
CXW Common Stock	02/16/2007		<b>A</b> <sup>(1)</sup>		1,041	A	\$0.00	84,019	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deriva Securi Acquir (A) or Dispos of (D)	erivative (Month/Day/Year) ecurities cquired A) or isposed f (D) nstr. 3, 4		e and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Amount of Derivative Securities Security Inderlying (Instr. 5) Derivative Security		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (Right to Buy)	\$53.06	02/16/2007		A		2,988		02/16/2008	02/16/2017	CXW Common Stock	2,988	\$0.00	2,988	D	

**Explanation of Responses:** 

1. Grant of restricted shares subject to vesting over a three-year period based upon satisfaction of certain performance criteria for the fiscal years ending December 31, 2007, 2008 and 2009. No more than one third of such shares may vest in the first performance period; however, the performance criteria are cumulative for the three-year period and are subject to accelerated vesting upon certain events (death, disability or certain "change in control" events).

2. Grant of options to purchase up to the number of shares listed, with vesting to occur in equal increments over a three-year period on the anniversary dates of the grant.

**Remarks:** 

#### William F. Andrews

\*\* Signature of Reporting Person

02/21/2007

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.