FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OIVIB APPROVAL									
OMB Number:	3235-0287								
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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(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

Name and Address of Reporting Person* MARSHALL THURGOOD JR						2. Issuer Name and Ticker or Trading Symbol CoreCivic, Inc. [CXW]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	RECIVIO		3. Date of Earliest Transaction (Month/Day/Year) 12/09/2024										er (give title						
5501 VII	RGINIA	4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Street) BRENTWOOD TN 37027														Line)	•				
(City)	(State)	(Zip)																
		Та	ole I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	Benef	icially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Securit		ties cially Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) (D)	or Pr	ice	Transa	saction(s) r. 3 and 4)			(Instr. 4)				
Common Stock 12/09/2									S		5,000	D	\$	21.37	4	1,925		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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		in Number of Expiration D (Month/Day/ Securities A) or olisposed of (D) (Instr. 3, 4 and 5)		ion Da	ate Amount of		int of rities rlying ative rity (Ins	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y G	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

Mike Grant

12/09/2024

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).