AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			CONTRACT ID CODE		PAGE OF PAGES			
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQ	UISITION/PURCHASE REQ. NO.	5. PR	1 43 OJECT NO. (If applicable)			
P00001	See Block 16C							
6. ISSUED BY CODE	70CDCR	7. ADN	MINISTERED BY (If other than Item 6)	CODE	ICE/DCR			
DETENTION COMPLIANCE AND REMOVALS ICE Office of Acquisition Management 500 12th St SW WASHINGTON DC 20024		ICE/Detention Compliance & Removals ICE Office of Acquisition Management 500 12th St SW Washington DC 20024						
8. NAME AND ADDRESS OF CONTRACTOR (No., street	, county, State and ZIP Code)	(x) 9A.	AMENDMENT OF SOLICITATION NO.					
GEO GROUP INC THE ATTN 4955 TECHNOLOGY WAY BOCA RATON FL 334313367		9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO. 7 OCDCR 2 5 D 0 0 0 0 0 0 0 7						
CODE JMLKZZ1NL2Z6	FACILITY CODE	0	2/26/2025					
	11. THIS ITEM ONLY APPLIES TO	AMENDM	IENTS OF SOLICITATIONS					
separate letter or electronic communication which incl RECEIVED AT THE PLACE DESIGNATED FOR THE OFFER. If by virtue of this amendment you desire to each letter or electronic communication makes referent 12. ACCOUNTING AND APPROPRIATION DATA (If required see Schedule 13. THIS ITEM ONLY APPLIES TO METERS AND APPLIES AND APPLIES TO METERS AND APPLIES AND APPLIES TO METERS AND APPLIES AND APPLI	udes a reference to the solicitation and a RECEIPT OF OFFERS PRIOR TO THE change an offer already submitted, such nee to the solicitation and this amendmen uired) ODIFICATION OF CONTRACTS/ORDER	amendme HOUR A change nt, and is	AND DATE SPECIFIED MAY RESULT IN REJE may be made by letter or electronic communica received prior to the opening hour and date sp DDIFIES THE CONTRACT/ORDER NO. AS DES	EDGEI CTION ation, p ecified	MENT TO BE I OF YOUR rovided ED IN ITEM 14.			
			SES SET FORTH IN ITEM 14 ARE MADE IN TH					
appropriation data, etc.) SET FORTH C. THIS SUPPLEMENTAL AGREEMEN			MINISTRATIVE CHANGES (such as changes in OF FAR 43.103(b).	т рауп	g onice,			
D. OTHER (Specify type of modification	and authority)							
X Mutual Agreement of	**							
E. IMPORTANT: Contractor is not	is required to sign this document an	d return		office				
14. DESCRIPTION OF AMENDMENT/MODIFICATION (UEI: JMLKZZ1NL2Z6 COR: , Contracting Officer: Contract Specialist:	(Organized by UCF section headings, in	cluding s	olicitation/contract subject matter where feasible	le.)				
There is no requisition asso	ciated with this act	ion.						
The purpose of this modifica								
1) Update the Contracting Of	ricer a vehiesemiqil	ve L	•					
Continued								
Except as provided herein, all terms and conditions of the	e document referenced in Item 9 A or 10	A, as he	retofore changed, remains unchanged and in fu	ıll force	e and effect.			
15A. NAME AND TITLE OF SIGNER (Type or print)			NAME AND TITLE OF CONTRACTING OFFIC					
, Executive Vice	e President							
15B. CONTRA	15C. DATE SIGNED		MERICA		16C. DATE SIGNED			
					04/02/2025			
	4/2/2025		Contracting Officer)					
Previous editio					RD FORM 30 (REV. 11/2016) ad by GSA FAR (48 CFR) 53.243			

 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED 70CDCR25D00000007/P00001
 PAGE 2
 OF 43

NAME OF OFFEROR OR CONTRACTOR
GEO. GROUP INC. THE

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	2) Update Section B.2 of this contract reflecting		\vdash		
	changes in medical services.		Ш		
	3) Update various sections to Attachment 01 - PWS.				
	o, opanio carrona rocciona de modernamento er 11121		Ш		
	4) Incorporate Attachment 12 - Wage Determination				
	- 2015-4211 revision 29 into the contract		Ш		
	5) Update and renumber all attachments as				
	outlined in Section J.1.				
	The colling of this Todaficite Polices		Ш		
	The ceiling of this Indefinite Delivery Indefinite Quanty contract does not change.				
	Period of Performance: 03/01/2025 to 02/29/2040				
			Ш		
	Change Item 0001 to read as follows (amount shown				
	is the obligated amount):		Ш		
0001	Detention Services				
	Determine Georgians for Terminal Actoins of				
	Detention Services for total detainees at a monthly rate of \$				
	a monenty race of y		Ш		
	The total ceiling has decreased:				
	From: S		Ш		
	By: \$				
	To: Ş				
	Obligated Amount: \$0.00				
			Ш		
	Change Item 0006 to read as follows(amount shown				
	is the obligated amount):		Ш		
0006	60 Day Transition Period		Ш		
	One time cost price of \$				
	The total ceiling has does not change remaining				
	q				
	Obligated Amount: \$0.00				
	Add Item 0007 as follows:				
0007	Medical Services - 10 months				
	The total ceiling for this CLIN is \$				
	Obligated Amount: \$0.00				
			ΙI		