SEC 1	Form 4
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# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

3235-0287

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number: 3			
	Estimated average burder			
	hours per response:			

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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

		*	2. Issuer Name and Ticker or Trading Symbol	E Deletionship of Departing Derson(c) to loguer					
1. Name and Address of Reporting Person*		on	CROSS COUNTRY HEALTHCARE INC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Dean Deborah A.					Director	10% Owner			
		(8.4:-1-11-)	CCRN ]	x	Officer (give title below)	Other (specify below)			
(Last)	(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)	1	SVP of Sales and	Marketing			
C/O CROSS COUNTRY HEALTHCARE, INC.			03/24/2016						
6551 PARK OF COMMERCE BLVD., NW		.VD., NW							
· · · · · · · · · · · · · · · · · · ·			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)				Line)					
BOCA RATON	FI	33487			Form filed by One Rep	orting Person			
	rL				Form filed by More tha Person	n One Reporting			
(City)	(State)	(Zip)							

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	03/24/2016		Α		6,324 <sup>(1)</sup>	Α	\$ <mark>0</mark>	<b>48,661</b> <sup>(2)</sup>	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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				

#### Explanation of Responses:

1. Settlement of performance shares granted March 31, 2015 pursuant to the issuer's Omnibus Stock Incentive Plan, which were settled based on the achievement of performance targets and are payable in shares of restricted stock. The shares of restricted stock will vest on December 31, 2017, provided that the reporting person remains an employee of the issuer at such time.

2. Due to a clerical error, the insider's amount of securities beneficially owned was previously miscalculated. As of March 24, 2016, the insider owns 48,661 common shares. The insider correctly reported all prior transactions.

## **Remarks:**

<u>/s/ Deborah A. Dean</u>

03/28/2016

Date

\*\* Signature of Reporting Person

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.

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