FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

Washington,	D.C	20549
vasilington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFI	CIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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1		of Reporting Perso	n*						ker or Tra		Symbol LTHCA	PF	INIC		Relations heck all a	nip of Report oplicable)	ing Pe	erson(s) to I	ssuer
Redd J	ames V.	<u>III</u>						UIVI	KI II	LA	LITICA	IXL	IIVC	<u>-</u> `	Dir	ector		10% O	
,	[CCRN]								_		cer (give title ow)	•	Other (specify					
(Last)	(3. Date of Earliest Transaction (Month/Day/Year) 03/26/2024									Chief Acco	untir	, ,						
C/O CROSS COUNTRY HEALTHCARE, INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)							-							
1	RK OF C	OMMERCE BC	ULEVA	RD,	4. If A	Amend	ment,	Date o	of Origina	ıl Filed	d (Month/Da	ay/Ye	ar)		Individual ne)	or Joint/Gro	up Fili	ng (Check A	Applicable
N.W.														X Form filed by One Reporting Person					
(Street)																m filed by Meson	ore th	an One Rep	orting
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(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	e I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed o	f, or	Ber	efici	ally Ow	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 5)				nd Secu Bene Own	5. Amount of Securities Beneficially Owned Following		Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(,	A) or D)	Price	Tran	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Stock			03/26/	2024				Α		3,325(1)	A	\$(\$ 0 16,044 D			D	
		Т									osed of, onvertib					ed			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		of s ig	8. Price of Derivative Security (Instr. 5)		e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
													An	nount					

1. Settlement of performance shares granted March 31, 2021 pursuant to the Issuer's Omnibus Stock Inventive Plan, which were settled based on the achievement of performance targets and are payable in shares of restricted stock.

Date

Exercisable

/s/ James V. Redd III

Expiration Date

03/28/2024

** Signature of Reporting Person

Number

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.