SEC For	m 4 FORM 4	4 U	NITE	O STAT	ES S	SEC	URI	TIE	S AN	DE	XCHAN	IGE	со	MMI	SSIO	N			
			Washington, D.C. 20549											OME	APPRO	VAL			
to Section 16. Form 4 or Form 5 obligations may continue. See					IT OF CHANGES IN BENEFICIAL OWNE									_				average burde	3235-0287 en 0.5
Instruc	tion 1(b).			Filed							es Exchang npany Act o		of 193	4				· .	
1. Name and Address of Reporting Person* DIRCKS THOMAS C					2. Issuer Name and Ticker or Trading Symbol <u>CROSS COUNTRY HEALTHCARE INC</u> [CCRN]									(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify				vner
	ast) (First) (Middle) C/O CROSS COUNTRY HEALTHCARE, I 551 PARK OF COMMERCE BOULEVAR				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2021									-	belov			below)	фесну
N.W.					4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Inc. Line)									Individual or Joint/Group Filing (Check Applicable le)					
(Street) BOCA RATON FL 33487															X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (A	Zip)																
		Table	e I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	v Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution			d Date,	3. Transaction Code (Instr. 8)					A) or	5. Amo Securit Benefic Owned	ount of ties cially I Following	Forr (D) d	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or I	Price		ed ction(s) 3 and 4)			(Instr. 4)
Common Stock 06/01/2					.021			Α		6,663(1)	A		\$ <mark>0</mark>	115,646			D		
Common Stock															74	4,005		Ι	By Dircks Family LLC
		Та									osed of, onvertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		of		6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e C S F Ily D I (I	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	Amo or Num of Title Shar		ber						

Explanation of Responses:

1. These restricted shares of common stock will vest June 1, 2022.

/s/ Thomas C. Dircks

<u>06/03/2021</u>

** Signature of Reporting Person 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.