FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF	CHANGES	IN BENEFIC	IAL (OWNERS	SHIP

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

Instruc	tion 1(b).	illiue. See		Filed							ies Exchang mpany Act o		f 1934		hours	s per res	sponse:	0.5
1. Name and Address of Reporting Person* Burns William J.				2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC [CCRN]								5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director 10% Ow Officer (give title Other (s				wner		
(Last) (First) (Middle) C/O CROSS COUNTRY HEALTHCARE, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/21/2023								X Officer (give title Officer (give title below) Chief Financial Officer					
6551 PARK OF COMMERCE BOULEVARD, N.W.				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person						
(Street) BOCA R	ATON F	FL 3	33487											For Per	n filed by Mo son	ore than	One Rep	orting
(City)	(:		(Zip)			Check to satisfy the	his box he affirn	to indi native	cate that defense	a tran	saction was m	ade pur 0b5-1(c)	suant to a	uction 10.		ten plan	that is inte	nded to
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			on 2A. Deemed Execution Date,		ıte,	3. 4. Securities Ad			s Acquired (A) or f (D) (Instr. 3, 4 a		r 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price	Trans (Inst	Transaction(s) (Instr. 3 and 4)			(1110411. 4)		
Common	Stock	Та	ıble II		ve Se						osed of, convertib			lly Owne	217,698 ed		D	
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercise Price of Derivative Security		Execu if any	eemed ition Date, h/Day/Year)	4. Transa Code (8)		5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr.	ative rities ired sed	6. Date Expira (Month	tion D		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)		ly C	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. The reported price is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$21.00 to \$21.73, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within such range.

Date

Exercisable

/s/ William J. Burns

Expiration Date

11/22/2023

** Signature of Reporting Person

Number

Shares

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.