FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB / II T TO V/ L											
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Grubbs William J				2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Grubos William J					CCRN]										X	Direc	tor	:	L0% O	wner		
(Last) (First) (Middle)					,										_	X	Office belov	er (give title v)		Other (pelow)	specify	
C/O CROSS COUNTRY HEALTHCARE, INC.					3. Date of Earliest Transaction (Month/Day/Year) 05/13/2014										President and CEO							
6551 PARK OF COMMERCE BLVD., N.W.					33, 23, 231 .																	
					4. If Amendment, Date of Original Filed (Month/Day/Year) 05/13/2014											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BOCA RATON FL 33487					00/13/2014										X	Form filed by One Reporting Person				on		
																	Form filed by More than One Reporting Person					
(City)		(Stat	te) (2	Zip)																		
			Tabl	e I - Non	-Deriva	ative	Sec	uritie	s Acc	quire	d, Di	spo	osed o	f, or	Bene	eficia	lly	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution D			n Date,	3. Transaction Code (Instr. 8)		on 🗀	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and S		Securities Beneficially		ship ect rect	7. Nature of Indirect Beneficial Ownership	
											de V		Amount	(A) or (D)		Price		Transa	ction(s) 3 and 4)			(Instr. 4)
Common Stock																112,956(1)		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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any				Date, T	4. Transaction Code (Instr. 8)		of		Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price Derivat Securit (Instr. 5		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	,	(A)	(D)	Date Exerc	isable	Ex Da	piration ite	Title	or Nun of	ount nber res						

Explanation of Responses:

1. On May 13, 2014, the reporting person filed a Form 4 mistakenly reporting the acquisition of 56,227 restricted shares of common stock vesting over a three year period based on the issuer achieving certain performance metrics. As of May 13, 2014, the reporting person owned only 112,956 shares of common stock.

Remarks:

<u>/s/ William J. Grubbs</u> <u>03/16/2015</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.