Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
-------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response	o. 0.5								

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

1. Name and Address of Reporting Person'  FITZGERALD GALE S  (Last) (First) (Middle)  C/O CROSS COUNTRY HEALTHCARE, INC. 6551 PARK OF COMMERCE BOULEVARD,						CROSS COUNTRY HEALTHCARE INC  [ CCRN ]  3. Date of Earliest Transaction (Month/Day/Year) 06/01/2022									k all app Direc	licable) tor er (give title	10% O Other ( below)		Owner (specify
N.W.  (Street) BOCA RATON FL 33487						4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	<u>ľ</u> ip)																
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefi	icially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution D			Date,	3. Transaction Code (Instr. 8)					, 4 and Secu		ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	Amount (A) o		ice	Transaction(s) (Instr. 3 and 4)				(111341. 4)
Common	Stock			06/01/	2022			A		7,201(1)	A	A	\$0 1		59,836		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)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		Code (	Transaction of Code (Instr. Derivative		vative irities iired r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In:	Price of rivative curity str. 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)		

## **Explanation of Responses:**

1. These restricted shares of common stock will vest June 1, 2023

/s/ Gale S. Fitzgerald

06/02/2022

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.