FORM 4

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

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20049	

Check this box if no longer subject	
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 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	nd Address of nald Colin	f Reporting Person*  1 Patrick			2. Issuer Name and Ticker or Trading Symbol  CROSS COUNTRY HEALTHCARE INC  [ CCRN ]									(Che	eck all appl Direct	licable)		rson(s) to Is 10% Ov Other (s	vner
	OSS COUN	rst) (I ITRY HEALTHO MMERCE BOU	•		3. Date of Earliest Transaction (Month/Day/Year) 03/08/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)								below Chief	Human F	Resou	below)	er		
(Street) BOCA F	ATON FI		3487 Zip)		4. 11 /	amena	ment, i	Date of	i Origina	u Filed	з (монилоа	y/ Year	)	Line	e) <mark>X</mark> Form	filed by On	e Rep	g (Check A orting Perso n One Repo	on
		Table	I - Non-E	Derivat	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				ate	Execution (Execution (		cution Date,		3. Transaction Code (Instr. 8) 4. Securition Disposed (5)					Benefic	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or F	Price	Transac	action(s) 3 and 4)			(111501.4)
Common	Stock			03/08/2	2023				A		6,670(1)	1	A	\$ <mark>0</mark>	\$0 30,564 D		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)	itle of 2. 3. Transaction 3A. Deemed 4. Transaction 2. Secution Date 2. Secution Date, Transaction 2. Security 2.		Transa Code (	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities ired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	3. Price of Derivative Security (Instr. 5)	ve derivative Securities	ly D	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Numl of						

## **Explanation of Responses:**

1. Settlement of performance shares granted March 31, 2020 pursuant to issuer's Omnibus Stock Incentive Plan, which were settled based on the achievement of performance targets and are payable in

shares of restricted stock.

/s/ Colin P. McDonald

03/10/2023

\*\* 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.