FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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	d Address of Rep <mark>Robert S.</mark>	orting Person*	2. Date of E Requiring S (Month/Day	tatement	3. Issuer Name and Ticker or Trading Symbol Fortrea Holdings Inc. [FTRE]				
(Last) (First) (Middle) 531 SOUTH SPRING STREET		06/09/2023		Relationship of Reporting Issuer (Check all applicable) Director Officer (give	10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) BURLINGTON NC 27215 (City) (State) (Zip)				title below) Treasure	below)	6	Individual or Joint/Group Filing Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of S				. Amount of Securities Beneficially Owned (Instr.)	3. Owner Form: D (D) or In (I) (Instr	oirect Own	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Security Underlying Derivative Security (Instr. 4)		4. Conversio or Exercis	e Form:	Ownership (Instr.	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ Robert S. Pringle

06/09/2023

** Signature of Reporting

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 5 (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.