FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

20549 OMB APPROVAL

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

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

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* GOODSON JOHN PAGE					2. Issuer Name and Ticker or Trading Symbol CCC Intelligent Solutions Holdings Inc. [CCCS]									all app Direct	licable) tor er (give title			wner (specify	
(Last) (First) (Middle) C/O CCC INTELLIGENT SOLUTIONS				3. Date of Earliest Transaction (Month/Day/Year) 08/06/2024									belov	w) See Rema		below)			
HOLDINGS 167 N. GREEN STREET, 9TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street)	Street) CHICAGO IL 60607			Ru	Form filed by More than One Reporting Person Rule 10b5-1(c) Transaction Indication											orting			
(City)	(Sta	ate) (Z	Zip)			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											nded to		
		Table	I - I	Non-Deriva	tive	Secui	rities	Ac	quire	ed, Di	sposed o	f, or l	3enefici	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution		on Date, C Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			nd 5) Secu Bene Own		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v /	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(IIISI	u. 4)	(Instr. 4)	
Common Stock 08/06/2024					24				S		45,560	D	\$10.081	0.0813(1)		87,892		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)	ative Conversion Date Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of ivative urity tr. 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)	
					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$10.00 to \$10.1500. The Reporting Person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range provided.

Remarks:

Executive Vice President, Chief Product and Technology Officer

/s/ Kevin Kane as Attorney-in-Fact for John Page Goodson 08/07/2024

** 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.