FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 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* Sharnak Lawrence Steven					2. Issuer Name and Ticker or Trading Symbol     CareCloud, Inc. [ CCLD ]      3. Date of Earliest Transaction (Month/Day/Year)										tionship of R all applicabl Director		Person(	(s) to Issuer		
(Last)	(First)	(N	(Middle)			02/02/2023									Officer (give title below)			Other (specify below)		
/ CLYDE RO	CLYDE ROAD					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					
(Street) SOMERSET	NJ	J 08873													Form filed by More than One Reporting Person					
(City)	(State)	) (Z	ip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
D D				2. Transaction Date (Month/Day/Year)			ZA. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis			ecurities Acquired (A) or osed Of (D) (Instr. 3, 4 an			and 5) Securities Beneficiall Following		Form	: Direct (D) lirect (I)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Price Transactio				(Instr. 4)	
Common Stock				02/02	02/02/2023				M		5,00	00	A	<b>\$0</b> <sup>(1)</sup>	18,500			D		
Common Stock				02/03	02/03/2023				M		2,75	50	0 A \$0 <sup>(2)</sup>		21,250			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)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Dat if any (Month/Day/Y	Co	Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	e s ally	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Co	ode	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	ion(s)			
Restricted Stock Unit	\$0 <sup>(1)</sup>	02/02/2023			M			5,000	(1)		(1)		mmon tock	5,000	\$0 <sup>(1)</sup>	20,50	0	D		
Restricted Stock Unit	\$0 <sup>(2)</sup>	02/03/2023			М			2,750	(2)		(2)		nmon tock	2,750	\$0 <sup>(2)</sup>	17,750	(3)	D		

## **Explanation of Responses:**

- 1. Represents the conversion upon vesting of restricted stock units into common stock on February 2, 2023. These restricted stock units and the shares of common stock issued upon vesting of such units were acquired under the Company's Amended and Restated Equity Incentive Plan, without payment by the reporting person.
- 2. Represents the conversion upon vesting of restricted stock units into common stock on February 3, 2023. These restricted stock units and the shares of common stock issued upon vesting of such units were acquired under the Company's Amended and Restated Equity Incentive Plan, without payment by the reporting person.
- 3. The remainder of these restricted stock units vest between August 2023 and August 2024.

/s/ Norman Roth Attorney-In-Fact 02/03/2023 for Lawrence S. Sharnak

\*\* 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.