FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average	burden					
ours per response	e 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 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

(Print or Ty	pe Response	s)		_												
1. Name and Address of Reporting Person* DALY JOHN N				2. Issuer Name and Ticker or Trading Symbol CareCloud, Inc. [MTBC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
7 CLYDE ROAD (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 03/31/2022							Office	r (give title belo	w)(ther (specify b	elow)
(Street) SOMERSET, NJ 08873				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned					
(Instr. 3) Date		2. Transaction Date (Month/Day/Year	Exec any		(Instr. 8)		(A) or Disposed o		of (D)			ollowing O(s) Fo	Ownership Form:	Beneficial		
				(Mor	(Month/Day/Year)		ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	nd 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		03/31/2022				S		4,350	D	\$ 5.17	7 41,900			D	
Common Stock 03/31/2022		03/31/2022			(G		400	D	\$ 0 (1)	41,500			D		
Reminder:	Report on a s	eparate line fo	r each class of secu Table II -	Deriva	ative Securit	ies Ac	equire	Pers cont the f	ons whained in orm dis	no respo n this fo splays a of, or Ber	rm are curre neficial	not requently valid		ormation spond unles trol number	s	1474 (9-02)
	1				outs, calls, w		ts, op								_	
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution D	ate, if	4. Transaction Code (Instr. 8)	5. Numl of Deriv Secur Acqu (A) o Dispo of (D (Instr 4, and	vative rities ired rosed)	and Expiration Date (Month/Day/Year) An Universe (Ir 4)		Amo Und Secu	ttle and bunt of erlying irities r. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)	
					Code V	(A)	(D)	Date Exer		Expiratio Date	Title	Amount or Number of Shares				

Reporting Owners

D (1 0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
DALY JOHN N 7 CLYDE ROAD	X						
SOMERSET, NJ 08873	21						

Signatures

/s/ Norman Roth, Attorney-in-Fact for John Daly	04/01/2022
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Bona fide gift by the reporting person for no consideration.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.