

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

OMB APPROVAL
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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. Name and Address of Reporting Person * 2. Date of Ever Statement (MN 10/4))/YYY	Y)	3. Issuer Name and Ticker or Trading Symbol CoreCard Corp [CCRD]				
ONE MECA WAY _X_ Director		rector icer (give title b	pelow)	10% OwnerOther (specify be 6. Individual or Y)X_Form filed by O	erson(s) to Issuer (Check all applicable) 10% OwnerOther (specify below) 6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
	Tabl	e I - Non-D	erivat	ive Securities Benefic	ially Owned				
1. Title of Security (Instr. 4)			Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock, par value \$.01 per share			0		D				
Table II - Derivativo	e Securities	Beneficially	y Own	ed (<i>e.g.</i> , puts, calls, wa	arrants, options	, convertible secu	urities)		
Title of Derivate Security astr. 4) 2. Date Exercisable and Expiration Date (MM/DD/YYYY) Date Expiration Date (MM/DD/YYYY)		on Date Y)	Secur Deriv (Instr	le and Amount of rities Underlying ative Security . 4) Amount or Number of	4. Conversio or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Exercisable			Shares		(Instr. 5)			

Explanation of Responses:

Remarks

Initial report of new Director elected as of October 4, 2022.

Reporting Owners

Damantina Oyyman Nama / Addus	Relationships						
Reporting Owner Name / Addre	Director	10% Owner	Officer	Other			
Petralia Kathryn							
ONE MECA WAY	X						
NORCROSS, GA 30093							

Signatures

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 control number.