SEC Form 4	
FORM	

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a 1 contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

OMB APF	PROVAL
MB Number:	3235-028

O Estimated average burden hours per response: 0.5

			2. Issuer Name and Ticker or Trading Symbol Alignment Healthcare, Inc. [ALHC]		ationship of Reporting Person(s) to Issuer (all applicable) Director 10% Owner			
	0 W. TOWN & COUNTRY RD.		3. Date of Earliest Transaction (Month/Day/Year) 09/12/2024		Officer (give title below)	Other (specify below)		
SUITE 1600			4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Che					
(Street) ORANGE	СА	92868			Form filed by One Rep Form filed by More that Person			
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7.										7. Nature
	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transa Code (8)		Disposed Of		r. 3, 4 and 5)	Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	09/12/2024		S ⁽¹⁾		25,000	D	\$ 11.0037 ⁽²⁾	1,183,221	D	
Common Stock	09/13/2024		S ⁽¹⁾		25,000	D	\$12.0005 ⁽³⁾	1,158,221	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			ite	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(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 Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Date of adoption of Rule 10b5-1 plan: 03/07/2024

2. The reported price in column 4 is a weighted-average price. Shares were sold in multiple transactions at a per share price ranging from \$11.00 to \$11.0685. The reporting person undertakes to provide to Alignment Healthcare, Inc., any security holder of Alignment Healthcare, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each price within the range.

3. The reported price in column 4 is a weighted-average price. Shares were sold in multiple transactions at a per share price ranging from \$12.00 to \$12.01. The reporting person undertakes to provide to Alignment Healthcare, Inc., any security holder of Alignment Healthcare, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each price within the range.

Remarks:

/s/ Christopher J. Joyce, as Attorney-in-Fact, for Joseph

09/13/2024

Konowiecki

** 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.