FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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	Check this box if no longer subject
١	to Section 16. Form 4 or Form 5
J	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

Name and Address of Reporting Person* Kimbro Melinda Michele						2. Issuer Name and Ticker or Trading Symbol Alignment Healthcare, Inc. [ALHC]									ck all app Direc	ationship of Report k all applicable) Director		10% Ov	vner
(Last) 1100 W.	(Fir	st) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/05/2023								X	belov	Officer (give title below) Chief Peo		Other (speci below) ple Officer		
SUITE 1600						4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ORANGE CA 92868												X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication													
						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.										ended to			
		Table	I - No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Owr	ned			
Date					Date Execu (Month/Day/Year) if any		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securiti Disposed 5)			ies Acquired (A Of (D) (Instr. 3		(A) or 3, 4 and	Securi Benefi Owned	Amount of ecurities eneficially wned ollowing		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) (D)	or	Price					
Common Stock 07/05/20						.023			A ⁽¹⁾	175,439		I	A	\$0.00	17	75,439		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)	ar) 3A. Deemed Execution Date, if any (Month/Day/Year) 4. Transact Code (In 8)			5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		De Se (Ir	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

1. Represents 175,439 restricted stock units, each restricted stock unit representing the right to receive one share of Common Stock of the Company, that will vest 25% on each of the first four anniversaries of the grant date, subject to the reporting person's continued service to the Company.

Remarks:

/s/ Richard A. Cross, as Attorney-in-Fact, for Melinda 07/07/2023 Kimbro

** 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.