FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	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).

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* <u>Kumar Dinesh M.</u>						2. Issuer Name and Ticker or Trading Symbol Alignment Healthcare, Inc. [ ALHC ]								Check	tionship of Reportir all applicable) Director Officer (give title		ng Person(s) to I 10% O Other (		vner
(Last) (First) (Middle) 1100 W. TOWN & COUNTRY RD., SUITE 1600						3. Date of Earliest Transaction (Month/Day/Year) 09/08/2022								X	below) Chief Med & C		below)		· ·
(Street) ORANG	·			4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(Sta	ate) (Z	<u>Z</u> ip)												Perso	)II			
		Table	I - I	Non-Deriva	tive	Secui	rities	Ac	quir	ed, D	isposed	of, or	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea					ear) E	2A. Deemed Execution Date, if any (Month/Day/Year)		,   T	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Secur Benef		cially d Following	Forn (D) c	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								d	ode	v	Amount	(A) or (D)	Price		Transa	nsaction(s) tr. 3 and 4)		4)	(111341. 4)
Common Stock 09/08/2022					2			S		50,000	D	\$16.053	31(1)	92	926,866		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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			cle and unt of urities erlying vative urity (Instr. d 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	e ercisabl	Expiratio e Date	n Title	or Number of Shares						

## **Explanation of Responses:**

1. The reported price in column 4 is a weighted-average price. Shares were sold in multiple transactions at a per share price ranging from \$16.00 to \$16.2150. 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/ Richard A. Cross, as

09/09/2022 Attorney-in-Fact, for Dinesh

M. Kumar

\*\* 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.