FORM 4

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

Washington, D.C. 20549

OMB APP	ROVAL								
OMB Number:	3235-0287								
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hours per response	. 05								

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

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*     Kardes Hakan				2. Issuer Name and Ticker or Trading Symbol Alignment Healthcare, Inc. [ ALHC ]							(Che	ck all app	tor	ng Per	10% O	wner			
(Last)	(Fir	st) (M	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 07/16/2024							V	below	Officer (give title below)  Chief Experience		Other (s below) e Officer	sресіту	
SUITE 1600				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)					.			
(Street)	(Street) ORANGE CA 92868											V	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.										nded to			
		Table	I - No	n-Deriva	tive S	Secu	rities	s Acq	uired,	Dis	posed of	, or E	Benef	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execu- ly/Year) if any		Deemed cution Date, y th/Day/Year)		3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3)					Securit Benefic Owned	. Amount of ecurities eneficially wned Following		n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or P	rice	Reporte Transa (Instr. 3	ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 07/16/2					2024				S		25,000	I	) (	\$9.98	8 405,444			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)	ative   Conversion   Date   Execution Date, rity   or Exercise   (Month/Day/Year)   if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		D Se (Ii	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
				Code		v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	per					

**Explanation of Responses:** 

Remarks:

/s/ Christopher J. Joyce, as

07/18/2024 Attorney-in-Fact, for Hakan

Kardes

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.