Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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. Issuer Name and Alignment He			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>KAO JOHN E</u>					<u>ounnouno</u> ,		X	Director	10%	6 Owner		
(Last) 1100 W. TOW	(First) /N & COUNTRY	(Mido RD., SI		3. Date of Earliest T 01/18/2023	ransaction (M	lonth/Day/Year)	X	Officer (give titl below) Chief Exe	e Oth belo ecutive Office	,		
(Street)				4. If Amendment, Da	ate of Original	l Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
ORANGE	CA	9280	68				X Form filed by One Reporting Person			erson		
(City)	(State)	(Zip)						Form filed by M Person	lore than One F	Reporting		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and	d 5)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			

								Following	(Instr. 4)	(Instr. 4)
			Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock	01/18/2023		s ⁽¹⁾		1,100	D	\$13.0091 ⁽²⁾	2,723,100	Ι	See Footnote ⁽³⁾
Common Stock								2,420,380	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)		of Deriv Secu Acqu (A) of Dispo of (D) (Instr	Derivative (Month/Day/Year) Securities Acquired A) or Disposed		xpiration Date Amo Month/Day/Year) Secu Unde Deriv Secu		xpiration Date Amou Month/Day/Year) Secu Unde Deriv		int of ities rlying ative ity (Instr.	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			Date Exercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person.

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 \$13.00 to \$13.05. 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. Represents securities held by JEK Trust, dated February 8, 2021, of which Mr. Kao is the trustee.

Remarks:

/s/ Richard A. Cross, as Attorney-in-Fact, for John E. 01/20/2023 Kao

** 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.