FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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

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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* Freeman Robert Thomas					2. Issuer Name and Ticker or Trading Symbol Alignment Healthcare, Inc. [ALHC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) 1100 W. TOWN & COUNTRY RD., SUITE 1600					3. Date of Earliest Transaction (Month/Day/Year) 03/14/2023							X	below	Chief Finance		below)	
(Street) ORANGE CA 92868			4. lf	4. If Amendment, Date of Original Filed (Month/Day/Year)						′ I	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			n 2 Ear) if	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			5. Amount of Securities Beneficially Owned Following		nt of es ally following	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
							Code	e V	Amount	(A) or (D)	Price	1	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)
Common Stock 03/14/2023				23	}		S		13,470(1)	D	\$6.327	(2)	717,978		D		
Common Stock													519,429		I		See Footnote ⁽³⁾
	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)		action (Instr.	5. Numb of Derivativ Securitic Acquired (A) or Dispose of (D) (Instr. 3, and 5)	ve (Mes d	. Date Ex expiration Month/Da		7. Titl Amou Secul Unde Deriv Secul 3 and	int of rities rlying ative rity (Instr.	Deri	rice of vative derivative securitity security security securitie Beneficic Owned Followin Reporter Transact (Instr. 4)		or Indirect (I) (Instr.		Beneficial Ownership ct (Instr. 4)
				Code	v	(A) (E		ate xercisab	Expiration le Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Represents the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of restricted stock units. This transaction does not represent a discretionary trade 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 \$5.93 to \$6.74. 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 FCO Holdings LLC, a limited liability company owned by FCO Holdings Trust One, an irrevocable trust of which Mr. Freeman is an indirect beneficiary.

Remarks:

/s/ Richard A. Cross, as

Attorney-in-Fact, for Robert 03/15/2023

Thomas Freeman

** 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.