FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES I	N BENEFICIAL	OWNERSHIP
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OMB APPROVAL								
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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).

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* 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 X Officer (give title Other (specify below) Chief Financial Officer						
(Last) (First) (Middle) 1100 W. TOWN & COUNTRY RD., SUITE 1600				3. Date of Earliest Transaction (Month/Day/Year) 03/08/2022														
(Street)	E C	A	92868		_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	state)	(Zip)											r ei soii				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans Date (Month)				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 a		d (A) or r. 3, 4 and 5	s 5. Amount of Securities Beneficially Owned Follow Reported		Form: D (D) or Ir		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common Stock 03/08/				8/202	2022		A ⁽¹⁾		136,58	9 A	\$0.00	420,5	420,505		D			
Common Stock											731,939			1 1	See Footnote ⁽²⁾			
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 Da if any (Month/Day/Y	Date, Transactio Code (Inst			on Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivati Securiti Benefic Owned Followin Reporte Transac	ve es ially ng	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)	
				Co	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Options (Right to Buy)	\$9.06	03/08/2022			A		100,365		(3)		03/08/2032	Common Stock	100,365	\$0.00	100,	365	D	

- 1. Represents 136,589 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.
- 2. 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.
- 3. Options vest 25% on each of the first four anniversaries of the grant date, subject to the reporting person's continued service to the Company as of the applicable vesting date.

Remarks:

/s/ Richard A. Cross, as

Attorney-in-Fact, for Robert 03/10/2022

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.