FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	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
Inchrication 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed 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* KAO JOHN E					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						
(Last) (First) (Middle) 1100 W. TOWN & COUNTRY RD., SUITE 1600					3. Date of Earliest Transaction (Month/Day/Year) 10/09/2024								Officer (give title Other (specify below) below) Chief Executive Officer						
(Street) ORANGE CA 92868 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - Non-Deriva	ative	Secui	rities	Acqı	uired	, Dis	posed	of, o	Benefi	cial	ly Own	ed				
Date			2. Transaction Date (Month/Day/Yea	2A. Deemed Execution I if any (Month/Day		Date,	3. Transaction Code (Instr. 8)		ı Dis	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficially Owned Following		es ally ng	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
							Cod	Code V		ount	(A) or (D)	r Price		Reported Transaction(s) (Instr. 3 and 4)					
Common	Stock		10/09/2024	124 S ⁽¹⁾ 90,000 D \$11.3282 ⁽²⁾ 2,543,100			See Footnote ⁽³⁾												
Common Stock												2,745,253		D					
		Tal	ole II - Derivat (e.g., pı									Benefici securitie		Owne	d				
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.	ion of I			Expiration Date (Month/Day/Year) Sign				8. Price of Derivative Security (Instr. 5)		9. Number derivative Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e es ally g	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownershi t (Instr. 4)	
				Code	v	(A)		Date D) Exercis		Expiration e Date		Amoun or Numbe of Shares	r						

Explanation of Responses:

- 1. Date of Rule 10b5-1 plan adoption: 03/14/2024
- 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 \$11.01 to \$11.92. 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/ Christopher J. Joyce, as Attorney-in-Fact, for John E.

10/10/2024

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.