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

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

	dress of Reporting		2. Issuer Name an Alignment H		ding Symbol <u>Inc.</u> [ALHC]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Freeman R	obert Thoma	<u>IS</u>	<u></u>	<u>, , , , , , , , , , , , , , , , , , , </u>			Director	10%	6 Owner		
(Last) 1100 W. TOV	(First) VN & COUNTH	(Middle) RY RD., SUITE 1600	3. Date of Earliest 01/18/2023	Transaction (N	lonth/Day/Year)	X	Officer (give title Other (spe below) below) Chief Financial Officer				
(Street)			4. If Amendment, I	Date of Origina	l Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
ORANGE	CA	92868				X	Form filed by One Reporting Person				
(City)	(State)	(Zip)	-				Form filed by N Person	Nore than One F	Reporting		
		Table I - Non-Der	ivative Securities	Acquired,	Disposed of, or Bene	ficially	/ Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			Execution Date,	3. Transaction Code (Instr. 8)		id 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)		

					Ca	ode	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		
Common Stock		01/18/2023		S	S ⁽¹⁾		1,100	D	\$13.0073 ⁽²⁾	519,	429		See Footnote ⁽³⁾	
Common Stock											731,	448	D	
		Tab	le II - Derivati (e.g., pı							Beneficially securities)	Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Dav/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities	Expiration Date (Month/Day/Year)		An Se	nount of E curities S	erivative	9. Number o derivative Securities Beneficially	Ownership Form:	11. Nature of Indirect Beneficial Ownership	

(Instr. 3)		or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Securities Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	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 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:

<u>/s/ Richard A. Cross, as</u> <u>Attorney-in-Fact, for Robert</u> <u>01/20/2023</u> <u>Thomas Freeman</u>

** 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.