SEC Form 4	
------------	--

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 ADDROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
	Estimated average burden			
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.5		
Filed pursuant to Section 10(a) of the Sectimites Excitating Act of 1954				

(Instr. 3 and 4)

1,193,119

D

Γ

				or Se	ction 30(h) of the In	vestme	nt Cor	mpany Act of 1	L940						
1. Name and Address of Reporting Person* KONOWIECKI JOSEPH S				2. Issuer Name and Ticker or Trading Symbol Alignment Healthcare, Inc. [ALHC]					(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
		<u>11 0</u>								Director	10% 0	Owner			
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/14/2023						X	Officer (give title below)	Other below	(specify)		
1100 W. TOWN & COUNTRY RD.				03/17/2023							Chairman of the Board				
SUITE 1600					mendment, Date of	f Origina	al Fileo	d (Month/Day/	Year)	6. Inc Line)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)										X	Form filed by On	e Reporting Per	son		
ORANGE	CA	92868									Form filed by Mo Person	ore than One Re	porting		
(City)	(State)	(Zip)		Rul	e 10b5-1(c)	Tran	sac	tion Indic	ation						
					check this box to indic atisfy the affirmative o						tract, instruction or writ	ten plan that is int	ended to		
		Table I - No	n-Derivat	tive S	ecurities Acq	uired,	Dis	posed of,	or Bei	neficiall	y Owned				
1. Title of Security (Instr. 3)			2. Transacti Date (Month/Day	-	Execution Date,		ction Instr.				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount	(A) or	Price	Transaction(s)		(1150.4)			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned	
(e.g., puts, calls, warrants, options, convertible securities)	

A⁽¹⁾

								-				-			
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)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D (Insti and S	vative rities hired r osed) r. 3, 4	Expiration Date (Month/Day/Year)		on Date Amount of		mount of ecurities nderlying erivative ecurity (Instr. 5)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

Common Stock

1. Represents 174,216 restricted stock units ("RSUs"), each RSU 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 as of the applicable vesting date.

Remarks:

<u>/s/ Christopher J. Joyce, as</u>	
Attorney-in-Fact, for Joseph	09/15/2023
S. Konowiecki	

** Signature of Reporting Person Date

(D)

Α

174,216

\$0.00

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).

09/14/2023

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.