FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
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hours per response:	0.5										

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*				2. Issuer Name and Ticker or Trading Symbol ALIGN TECHNOLOGY INC [ALGN]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Conroy Kevin T				TELOT, TEOTH OEOOT IIIO [MEON]									_ :	X Directo	r 10% Ow		ner				
(Last)	(Fi	rst) ((Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/05/2023										Officer below)	(give title		Other (specification)	pecify		
C/O ALIGN TECHNOLOGY, INC.					4. If	If Amendment, Date of Original Filed (Month/Day/Year)									6. Ir	6. Individual or Joint/Group Filing (Check Applicable					
410 NO. SCOTTSDALE RD., SUITE 1300															Line)						
														X Form filed by One Reporting Person							
(Street)																Form f	iled by More า	than	One Repor	ting	
TEMPE AZ 85288																					
Rule 10b5-1(c) Transaction Indication																					
(City)	(St	tate)	(Zip)		Ιп	Check	this bo	ox to inc	dicate tl	that a tra	ınsac	tion was i	made purs	uant t	to a cont	tract. instructi	on or written	olan th	at is intende	d to	
satisfy the affirmative defense conditions of Rule 10b5										10b5-1(c).	See	Instruction	on 10.								
		Tabl	e I - Non-D	Deriva	tive	Sec	uritie	es Ac	quir	ed, D	isp	osed o	of, or B	ene	ficial	ly Owne	t				
1. Title of Security (Instr. 3) 2. Transac Date				Execut			ition Date,		Transaction Dispose			ities Acqu d Of (D) (I	ired (nstr. :	(A) or 3, 4 and		s Forn		Direct o	. Nature f Indirect		
(Month/Da					ay/Yea		any Ionth/Day/Yea		Code (In ar) 8)		str. 5)					Owned F	Owned Following () (Instr. 4)	Beneficial Ownership	
					C	Code V		Amount	(A)	or	Price	Reported Transact	ion(s)		"	Instr. 4)					
					Code V Amount (D)							(Instr. 3 and 4)									
	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 Dar if any (Month/Day/Yo	ite, Ti	4. Transaction Code (Instr. 8)		of		Expira	te Exerc ration Da th/Day/Y	ate	Amount of			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
														or	mount						
				c	ode	v	(A)	(D)	Date Exerc	cisable	Ex _l Da	piration te	Title	of							
Restricted Stock Unit	\$0.0001(1)	12/05/2023			Α		660		((2)		(2)	Commor Stock	1	660	\$0.00	660		D		

Explanation of Responses:

- 1. Represents par value of ALGN common stock.
- 2. 100% of the restricted stock unit granted on December 5, 2023 will become vested on the earlier of (i) May 22, 2024 or (ii) the date of the 2024 annual meeting of stockholders. Shares will be delivered to reporting person on the vest date.

Remarks:

/s/ Julie Ann Coletti Attorneyin-Fact for Kevin T Conroy

12/07/2023

** Signature of Reporting Person

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.