FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

1. Name and Address of Reporting Person* Mehrotra Parth						2. Issuer Name and Ticker or Trading Symbol Privia Health Group, Inc. [PRVA]								eck all appli Direct	cable) or	ng Person(s) to Iss 10% Ov		vner		
	HEALTH ((First) (Middle) CALTH GROUP, INC.						3. Date of Earliest Transaction (Month/Day/Year) 12/22/2021								X Officer (give title Other (specify below) President and COO				
950 N. GLEBE RD., SUITE 700 (Street) ARLINGTON VA 22203 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - N	on-Deri	ivativ	e Sec	curit	ties Ac	quired	l, Di	sposed o	f, or Be	neficial	y Owned	<u> </u>					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		xecution Date, any		tion nstr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				es ially Following	Form:	Direct of Indirect of Its (1)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)			
Common Stock, \$0.01 par value per share 12/22			/2021)21			M		20,000	Α	\$2	117,391			D					
Common Stock, \$0.01 par value per share 12/22/			/2021	21		S ⁽¹⁾		20,000	D	\$25.136	(2) 97	7,391		D						
		-	Table II								posed of, convertil			Owned						
		Date (Month/Day/Year) if	Execution if any	A. Deemed kecution Date,		ction Instr.	5. Number n of		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. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e (s i lly i	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares							
Stock Option (Right to	\$2	12/22/2021			M			20,000	08/28/20	018	08/27/2033	Common Stock	20,000	\$0	1,750,9	080	D			

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 11, 2021.
- 2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$25.00 to \$25.60 per share. The reporting person undertakes to provide to Privia Health Group, Inc., any security holder of Privia Health Group, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth herein.

Remarks:

/s/ Thomas Bartrum, as attorney-in-fact

12/23/2021

** 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.