SEC Form 4 FORM 4	UNITE	D STAI	ES :	SECURITIE	S AN	ID F	XCHAN	GE C	OMMIS	SION			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549									□ □ □	OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	NT OF CHANGES IN BENEFICIAL OWNERSHIP I pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person Morris Matthew Shawn		uer Name and Tick ia Health Gro				(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) PRIVIA HEALTH GROUP, INC. 950 N. GLEBE RD., SUITE 700	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/13/2022							X Officer (give title Other (specify below) below) Chief Executive Officer			
(Street) ARLINGTON VA	22203		Line)								bint/Group Filing (Check Applicable ed by One Reporting Person ed by More than One Reporting		
(City) (State)	(Zip)												
	able I - No			Securities Acc	-	, Dis	· ·		,	1		1	
1. Title of Security (Instr. 3) 2. Tran Date (Month			tion y/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of	Acquired (D) (Instr	(A) or . 3, 4 and 5)	5. Amount of Securities Beneficially Owned Followin	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock, \$0.01 par value pe	r share	10/13/2	2022		М		27,343	A	\$2	149,082	D		
Common Stock, \$0.01 par value pe	r share	10/13/2	.022		S ⁽¹⁾		12,900	D	\$34.54(2)	136,182	D		
Common Stock, \$0.01 par value pe	r share	10/13/2	.022		S ⁽¹⁾		14,443	D	\$35.23(3)	121,739	D		
Common Stock, \$0.01 par value pe	r share	10/14/2	.022		М		23,437	A	\$2	145,176	D		
Common Stock, \$0.01 par value pe	r share	10/14/2	.022		S ⁽¹⁾		15,787	D	\$33.45(4)	129,389	D		
Common Stock, \$0.01 par value pe	r share	10/14/2	2022		S ⁽¹⁾		7,650	D	\$34.25(5)	121,739	D		

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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				
Stock Option (Right to Purchase)	\$2	10/13/2022		М			27,343	(6)	08/27/2033	Common Stock	27,343	\$0	4,569,402	D	
Stock Option (Right to Purchase)	\$2	10/14/2022		М			23,437	(6)	08/27/2033	Common Stock	23,437	\$0	4,545,965	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 31, 2022.

2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$34.02 to \$35.01 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.

3. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$35.02 to \$35.47 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.

4. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$32.88 to \$33.87 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.

5. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$33.88 to \$34.73 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.

6. Reflects stock options to purchase shares of common stock of the Issuer under the Plan. Prior to the transactions reported in this Form 4, 3,761,377 of the stock options were fully vested and exercisable. 890,090 of the stock options vest on October 29, 2022.

Remarks:

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

10/17/2022

** 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.