FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
DIVITED TO CONTROL OF THE PERIOD OF THE CONTROL OF

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bu	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 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*     Mountcastle David						2. Issuer Name <b>and</b> Ticker or Trading Symbol Privia Health Group, Inc. [ PRVA ]								(Che	ck all application	able)	ng Person(s) to Iss 10% O		
(Last) (First) (Middle) PRIVIA HEALTH GROUP, INC. 950 N. GLEBE RD., SUITE 700.						3. Date of Earliest Transaction (Month/Day/Year) 04/28/2021									below)	below) Chief Financial Officer			респу
(Street) ARLING (City)			22203 (Zip)		. 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc Line)	lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Ta	ble I - Non	-Deriv	/ativ	e Se	curities	s Acc	quired,	Disp	osed c	of, or B	ene	ficially	Owned				
1. Title of S	Security (Ins	tr. 3)		2. Trans Date (Month/			2A. Deem Execution if any (Month/Da	Date,	3. Transa Code (I 8)		4. Securi Dispose 5)				5. Amoun Securities Beneficial Owned Fo	s lly ollowing	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A)	or	Price	Transaction (Instr. 3 and	on(s)			inisu. 4)
Common Stock, \$0.01 par value per share <sup>(1)</sup> 04/28									A		22,82	26	A	<b>\$0</b>	75,9	905		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 Dat if any (Month/Day/Ye	C	ransac ode (Ir		Derivative		6. Date Exercisabl Expiration Date (Month/Day/Year)		of Securities		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				C	ode	v	(A) (D)		Date Exercisabl		xpiration ate	Title	or Nu	mount umber Shares		(Instr. 4)			
Stock Option (Right to Purchase)	\$23	04/28/2021			A		102,534		(2)		(2)	Common Stock 102		02,534	\$0	451,612		D	

## **Explanation of Responses:**

- 1. Represents restricted stock units granted under the Issuer's 2021 Omnibus Incentive Plan that will vest in substantially equal annual installments on the second, third and fourth anniversaries of the grant date.
- 2. Represents stock options granted under the Issuer's 2021 Omnibus Incentive Plan that will vest in substantially equal annual installments on the second, third and fourth anniversaries of the grant date. The stock options will expire on the tenth anniversary of the grant date.

/s/ Thomas Bartrum, EVP, **General Counsel** 

04/30/2021

\*\* 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.