FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL		
OMB Number:	er: 3235-0287	
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	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

ARLINGTON VA 22203 Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or writte satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) 3.	p Person(s) to Issuer		
(Last) (First) (Middle) PRIVIA HEALTH GROUP, INC. 950 N. GLEBE ROAD, SUITE 700 (Street) ARLINGTON VA 22203 Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or writte satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) if any (Month/Day/Year	100/ 0		
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Street) ARLINGTON VA (State) (City) (City) (State) (City) (Check this box to indicate that a transaction was made pursuant to a contract, instruction or written satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	Filing (Check Applicable		
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	ed Of (D) (Instr. 3, 4 Securities Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4)		
Code V Amount (A) or (D) Price Reported Transaction(s) (Instr. 3 and 4)			
Common Stock, \$0.01 par value per share 07/01/2023 A 7,758 ⁽¹⁾ A \$0 19,127	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. Transaction Date (Month/Day/Year) (Instr. 3) 3. Transaction Date (Month/Day/Year) (Instr. 3) 3. Transaction Date (Month/Day/Year) (Instr. 3) 3. Transaction Date (Execution Date (Month/Day/Year) (Instr. 3) 3. Transaction Date (Month/Day/Year) (Instr. 3) 3. Transaction Date (Month/Day/Year) (Instr. 3) 4. Deemed (Instr. 8) 5. Date Exercisable and Expiration Date (Month/Day/Year) Securities (Month/Day/Year) Owned Following Reported Transaction(Instr. 4) Reported Transaction(Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Code V (A) (D) Exercisable Expiration Date Expiration Date Title Shares			

Explanation of Responses:

1. Represents restricted stock units granted under the Issuer's 2021 Omnibus Incentive Plan that will become fully vested on the first anniversary of the grant date.

Remarks:

/s/ Thomas Bartrum, as attorney-in fact

07/05/2023

** 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.