## SEC Form 5

## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0362				
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hours per response	: 1.0				

Form 3 Holdings Reported.

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Form 4 Transac	tions Reported.	File	ed pursuant to Sect or Section 30(h		e Securities Exch ment Company A										
1. Name and Address of Reporting Person <sup>*</sup> Butler Jeffrey B				2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Privia Health Group, Inc.</u> [ PRVA ]					ationship of Repor k all applicable) Director	•	) to Issuer 9% Owner				
1	TH GROUP, INC.	(Middle)	3. Statement fo 12/31/2021	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021					Officer (give titl below)		ther (specify slow)				
950 N. GLEBE RD., SUITE 700.			_ 4. If Amendmer	4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) ARLINGTON	VA	22203						X	Form filed by C Form filed by N Person						
(City)	(State)	(Zip)													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
	Amount (A) or (D) Price		Price		Year (Instr. 3 and	(Instr. 4)									

			Amount	(D)	Price	4)	(instr. 4)	
Common Stock	11/02/2021	<b>G</b> <sup>(1)</sup>	870,100	D	\$0	3,942,212	D	
Common Stock	11/02/2021	G <sup>(1)</sup>	870,100	A	\$0	870,100	I	Held indirectly through Butler Family Trust <sup>(1)</sup>
Common Stock	12/28/2021	<b>G</b> <sup>(2)</sup>	290,000	D	\$ <mark>0</mark>	3,652,212	D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned								

(e.g., puts, calls, warrants, options, convertible securities) 1. Title of 7. Title and Amount of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 8. Price of 9. Number of 10. 11. Nature Conversion Execution Date, Transaction Ownership of Indirect Derivative Expiration Date Derivative derivative Date (Month/Dav/Year) Security or Exercise if any (Month/Day/Year) Code (Instr. Derivative (Month/Day/Year) Securities Security Securities Form: Beneficial (Instr. 3) Price of 8) Securities Underlying (Instr. 5) Beneficially Direct (D) Ownership Acquired (A) or Disposed Derivative Owned Following or Indirect (I) (Instr. 4) (Instr. 4) Derivative Security (Instr. 3 and 4) Security Reported of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount or Number Expiration Date of Shares (A) (D) Exercisable Date Title

Explanation of Responses:

1. On November 2, 2021, the reporting person transferred 870,100 shares of the Issuer's common stock to a family trust. The reporting person disclaims beneficial ownership of shares held by the trust except to the extent of his pecuniary interest therein.

2. On December 28, 2021, the reporting person transferred 290,000 shares of the Issuer's common stock to the Butler Ventures Fund, Inc., a charitable foundation of which the reporting person and his spouse are directors. The reporting person has voting and investment power over the securities owned by the foundation.

Remarks:

/s/	Thomas	Bartrum,	<u>attorney-</u>	~	_				_	_		_
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<u>in-fact</u>

\*\* 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.