FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|----------------|------|-------|
| vvasiliigtoii, | D.C. | 20049 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | |
|-----|---------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| | Estimated average b | urden | | | | | | | | |
| - 1 | 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

| | | | | | | - 300 | | , , | | | | | | | | | | |
|--|---|--|---|---|--------------------------------------|---|-------|--|---|----------|------------------------|---|--|--|---|---------------|--|---------------------------------------|
| 1. Name and Address of Reporting Person* <u>Bartrum Thomas</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Privia Health Group, Inc. [PRVA] | | | | | | | | | tionship of Reporting all applicable) Director Officer (give title | | Person(s) to Issuer 10% Owner Other (speci | |
| | HEALTH (| GROUP, INC. | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/03/2022 | | | | | | | | A below) | .0 | eral C | below) | |
| (Street) | | | 22203 | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (5 | state) | (Zip) | | | | | | | | | | | | | | | |
| | | Tak | ole I - No | n-Deriv | vative | e Se | curit | ies Ac | quired | , Di | sposed o | f, or Be | neficial | ly Owned | 1 | | | |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. | | ies Acquired (A) or Of (D) (Instr. 3, 4 and | | Benefici | es | Form y (D) o | n: Direct or Indirect | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | , | | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock, \$0.01 par value per share | | | 10/03 | /2022 | | | | M | | 68,072 | A | \$2 | 159 | 9,427 | | D | | |
| Common Stock, \$0.01 par value per share | | | 10/03 | /03/2022 | | | | S ⁽¹⁾ | | 35,957 | D | \$33.82 | (2) 123 | 123,470 | | D | | |
| Common Stock, \$0.01 par value per share 10 | | | 10/03 | /2022 | | | | S ⁽¹⁾ | | 32,115 | D | \$34.4 | 3) 91 | 91,355 | | D | | |
| Common Stock, \$0.01 par value per share 10/04/ | | | /2022 | 2022 | | М | | 25,000 | A | \$2 | 116 | 116,355 | | D | | | | |
| Common Stock, \$0.01 par value per share 10/04/2 | | | | /2022 | 2022 | | | S ⁽¹⁾ | | 25,000 | D | \$35.37 | 91,355 | | | D | | |
| | | | Table II | | | | | | | | oosed of, convertil | | | Owned | | , | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deem Execution if any (Month/D | n Date, | 4. Transactio Code (Inst 8) | | on of | | 6. Date Exerci Expiration Dat (Month/Day/Ye | | te | 7. Title an of Securit Underlyin Derivative (Instr. 3 a | g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (Right to Purchase) | \$2 | 10/03/2022 | | | М | | | 68,072 | (5) | | 08/27/2033 | Common Stock | 68,072 | \$0 | 266,22 | 8 | D | |
| Stock Option (Right to Purchase) | \$2 | 10/04/2022 | | | М | | | 25,000 | (5) | | 08/27/2033 | Common Stock | 25,000 | \$0 | 241,22 | 8 | 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 30, 2022.
- 2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$33.07 to \$34.06 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 \$34.08 to \$34.69 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 \$35.00 to \$35.62 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. Reflects stock options to purchase shares of common stock of the Issuer under the Plan. Prior to the transactions reported in this Form 4, 270,198 of the stock options were fully vested and exercisable. 64,102 of the stock options will vest on October 29, 2022.

Remarks:

/s/ Thomas Bartrum

10/05/2022

** 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.