SEC Form	4
----------	---

Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

		JVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
	Estimated average bur	rden
	hours per response:	0.5

Ī

	 404 3 64	.	

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

		on*	2. Issuer Name and Ticker or Trading Symbol <u>Privia Health Group, Inc.</u> [PRVA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	<u>t11</u>			X	Director	10% Owner		
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/08/2024	X	Officer (give title below)	Other (specify below)		
PRIVIA HEAL	PRIVIA HEALTH GROUP, INC. 950 N. GLEBE RD., SUITE 700 Street)		05/06/2021		Chief Executive (Officer		
950 N. GLEBE RD., SUITE 700			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicat Line)				
(Street)				X	Form filed by One Repo	rting Person		
ARLINGTON	VA	22203			Form filed by More than Person	One Reporting		
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication					
			Check this box to indicate that a transaction was made pursuant t satisfy the affirmative defense conditions of Rule 10b5-1(c). See I			that is intended to		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, Transacti			Disposed Of (Disposed Of (D) (Instr. 3, 4 and 5)		Securities Beneficially	Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount (A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(11004)	
Common Stock, \$0.01 par value per share	03/08/2024		A		119,885(1)	Α	\$ <mark>0</mark>	273,859	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(* 5 / 1**	,	,							,			
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. Transa Code (8)			vative rities lired r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	Deriv	unt of rities rlying ative rity (Instr.	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				

Explanation of Responses:

1. Reflects restricted stock units under the 2021 Omnibus Incentive Plan that will vest in substantially equal annual installments on the first, second and third anniversaries of the grant date, generally subject to continued service throughout such dates. Additional Remarks

Remarks:



03/15/2024

** 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.