FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours ner resnonse.	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

1. Name and Address of Reporting Person*  Morris Matthew Shawn						2. Issuer Name <b>and</b> Ticker or Trading Symbol Privia Health Group, Inc. [ PRVA ]								ck all application	g Person(s) to Issuer 10% Owne		vner		
	HEALTH	First) GROUP, INC SUITE 700					3. Date of Earliest Transaction (Month/Day/Year) 11/23/2021							Officer (give title Other (specify below)  CHIEF EXECUTIVE OFFICER					
(Street) ARLING (City)		ZA State)	22203 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Ye						y/Year)	6. Inc Line)	Form fil	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Ta	ble I - N	on-Der	rivativ	ve S	ecur	ities Ac	quirec	d, Di	sposed o	f, or Be	neficially	Owned					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					Execution Date,				s Acquired (A) or of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	V	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	ion(s)			(111311.4)		
Common Stock, \$0.01 par value per share 11/23/20				3/2021	)21		М		339,062	A	\$2	460	,801		D				
Common Stock, \$0.01 par value per share 11/23/20				3/2021	)21		S <sup>(1)</sup>		339,062	D	\$27.695	121	,739		D				
			Table II								posed of, convertil			Owned					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (l 8)	ction	5. Number of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	on(s)			
Stock Option (Right to Purchase)	\$2	11/23/2021		М				339,062	08/28/2	019	08/27/2033	Common Stock	339,062	\$0	5,540,620		D		

## **Explanation of Responses:**

- 1. This sale was effected pursuant to a public secondary offering of shares of common stock, par value \$0.01 per share (the "Common Stock"), of Privia Health Group, Inc. on November 23, 2021.
- 2. This amount represents the \$29.00 secondary public offering price per share of Common Stock of Privia Health Group, Inc., less the underwriting discount of \$1.305 per share.

/s/ Thomas Bartrum, as attorney-in-fact

11/26/2021

\*\* 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.