FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden 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)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See

1. Name and Address of Reporting Person*

PRIVIA HEALTH GROUP, INC. 950 N. GLEBE RD., SUITE 700

(First)

VA

(State)

3. Transaction

3A. Deemed

(Middle)

22203

(Zip)

Instruction 10

Mehrotra Parth

(Last)

(Street)

(City)

ARLINGTON

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

2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Privia Health Group, Inc. [PRVA] ✓ Director 10% Owner Officer (give title Other (specify 1 below) 3. Date of Earliest Transaction (Month/Day/Year) 09/10/2024 Chief Executive Officer 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable 1 Form filed by One Reporting Person Form filed by More than One Reporting

7. Title and Amount

8. Price of 9. Number of

10.

11. Nature

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 2A. Deemed Execution Date, 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. Ownership Form: Direct 1. Title of Security (Instr. 3) 2. Transaction 5. Amount of 7. Nature Transaction Date (Month/Day/Year) Securities Beneficially of Indirect Beneficial if any (Month/Day/Year) (D) or Indirect Code (Instr. Owned Following 8) (I) (Instr. 4) Ownership (Instr. 4) Reported Transaction(s) (Instr. 3 and 4) (A) or (D) Price ν Code Amount Common Stock, \$0.01 par value per share 09/10/2024 $M^{(1)}$ 56,027 \$2 303,798 D $M^{(1)}$ Common Stock, \$0.01 par value per share 09/10/2024 60,520 A \$2 364,318 D $M^{(1)}$ Common Stock, \$0.01 par value per share 09/10/2024 18,595 A \$2 382,913 D **S**⁽¹⁾ \$18.5(2) Common Stock, \$0.01 par value per share 09/10/2024 135,142 D 247,771 D M⁽¹⁾ Common Stock, \$0.01 par value per share 09/11/2024 48,645 A \$2 296,416 D M⁽¹⁾ Common Stock, \$0.01 par value per share 09/11/2024 52,546 A \$2 348,962 D $M^{(1)}$ D Common Stock, \$0.01 par value per share 09/11/2024 16,144 A \$2 365,106

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

6. Date Exercisable and

5. Number

Transaction

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Purchase)	\$2	09/10/2024		M ⁽¹⁾			56,027	(3)	08/27/2033	Common Stock, \$0.01 par value per share	56,027	\$0	48,645	D	
Stock Option (Right to Purchase)	\$2	09/10/2024		M ⁽¹⁾			60,520	(3)	12/04/2034	Common Stock, \$0.01 par value per share	60,520	\$0	52,546	D	
Stock Option (Right to Purchase)	\$2	09/10/2024		M ⁽¹⁾			18,595	(3)	09/07/2035	Common Stock, \$0.01 par value per share	18,595	\$0	16,144	D	
Stock Option (Right to Purchase)	\$2	09/11/2024		M ⁽¹⁾			48,645	(3)	08/27/2033	Common Stock, \$0.01 par value per share	48,645	\$0	0	D	
Stock Option (Right to Purchase)	\$2	09/11/2024		M ⁽¹⁾			52,546	(3)	12/04/2034	Common Stock, \$0.01 par value per share	52,546	\$0	0	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. 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)				6. Date Exerc Expiration Da (Month/Day/\)	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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				
Stock Option (Right to Purchase)	\$2	09/11/2024		M ⁽¹⁾			16,144	(3)	09/07/2035	Common Stock, \$0.01 par value per share	16,144	\$0	0	D	

Explanation of Responses:

- 1. These transactions occurred pursuant to a 10b5-1 trading plan previously adopted by the reporting person. The sale was made to cover the payment of the exercise price and tax obligations related to the exercise of stock options, with the balance of the shares acquired upon exercise continuing to be held by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$18.37 to \$18.73 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. All stock options are fully vested and exercisable.

Remarks:

/s/ Anita Beth Adams, as attorney-in-fact 09/12/2024

** 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.