FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, I	D.C. 20549
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heck this box if no longer subject	
Section 16. Form 4 or Form 5	
oligations may continue. See	
atmostice 4/b)	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     Pardo Ryan						2. Issuer Name and Ticker or Trading Symbol LifeStance Health Group, Inc. [ LFST ]									Relationship of Reporting Person(s) to (Check all applicable)     Director     Officer (give title)  Other						
(Last) C/O LIF	(Fir	est) (M	Middle) JP, INC	C.	3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024									X Officer (give title Other (specify below)  See Remarks							
4800 N. SCOTTSDALE ROAD, SUITE 2500					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	TSDALE AZ 85251															X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to																				
	■ Satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				tion 2A. Deeme			ed Date,	e, Transac Code (li		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			A) or 5. Amo 5. Amo Securit Benefic		unt of ies ially Following	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	Tra	ansad	nsaction(s) tr. 3 and 4)			(111511. 4)		
Common Stock 04/01/2					2024				S <sup>(1)</sup>		9,830	D	\$5.	807,947		7,947	]	D			
Common Stock														2,55		51,520			By Trust <sup>(2)</sup>		
	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)	if any	med on Date, Day/Year)		Transaction of Code (Instr. 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 o Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O F D o (I	0. Dwnership Form: Direct (D) Fr Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	Code V (A) (D)		Date Expirat Exercisable Date		Expiration Date	N O	Amount or Number of Shares									

## **Explanation of Responses:**

- 1. Required number of shares sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of restricted stock units. This sale was made to satisfy tax withholding obligations through a "sell to cover" transaction and does not represent a discretionary trade by the Reporting Person.
- 2. Shares held of record by Kimberly Pardo Irrevocable Trust. The Reporting Person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these securities on this report shall not be deemed an admission that the Reporting Person is the beneficial owner of the reported securities for purposes of Section 16 of the Securities and Exchange Act of 1934 or for any other purpose.

## Remarks:

Chief Legal Officer and Secretary

04/19/2024 By: /s/ Ryan Pardo

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.