



Reimagining Mental Health

June 2021



Legal Disclaimer

General Disclaimer

Unless otherwise indicated, all references in this presentation to “LifeStance”, “we”, “our”, “us”, or similar terms refer to LifeStance Health Group, Inc., LifeStance TopCo, L.P. and their subsidiaries.

LifeStance Health Group, Inc. has filed a registration statement on Form S-1 (including a preliminary prospectus) with the Securities and Exchange Commission (“SEC”) for the offering to which this presentation relates. The registration statement has not yet become effective. Sales of securities of LifeStance Health Group, Inc. offered pursuant to the registration statement may not be made or offers for such securities accepted prior to the time the registration statement becomes effective. Before making a decision to invest, you should read the registration statement, the preliminary prospectus and any other documents we file with the SEC for more complete information about us and the offering. You can obtain these documents for free by visiting EDGAR on the SEC’s website at www.sec.gov. Alternatively, copies of the preliminary prospectus may be obtained from: Morgan Stanley & Co. LLC, Prospectus Department, 180 Varick Street, 2nd Floor, New York, NY 10014; Goldman Sachs & Co. LLC, Prospectus Department, 200 West Street, New York, NY 10282 (telephone: 1-866-471-2526; facsimile: 212-902-9316; email: Prospectus-ny@ny.email.gs.com); J.P. Morgan Securities LLC, c/o Broadridge Financial Solutions, 1155 Long Island Avenue, Edgewood, NY 11717 (telephone: 631-254-1735); or Jefferies LLC, Equity Syndicate Prospectus Department, 520 Madison Avenue, 2nd Floor, New York, NY 10022 (telephone: 877-821-7388; email: Prospectus_Department@Jefferies.com).

The information contained in this presentation is not intended to provide complete disclosure upon which an investment decision should be made. The merit and suitability of an investment in LifeStance should be independently evaluated and any person considering such an investment in LifeStance is advised to obtain independent legal, tax, accounting, financial and other related advice prior to making an investment. This presentation shall not constitute an offer to sell or the solicitation of an offer to buy any securities, nor shall there be any sale of securities in any state or jurisdiction in which such offer, solicitation or sale would be unlawful prior to registration or qualification under the relevant securities laws of any such state or jurisdiction. Sales and offers to sell the securities described herein shall only be made in accordance with the Securities Act of 1933, as amended (the “Securities Act”) and the regulations of the SEC.

Cautionary Note Regarding Forward-Looking Statements

Information in this presentation and the accompanying oral presentation contains forward-looking statements about LifeStance and the industry in which LifeStance operates, including statements regarding future results of operations and financial position of LifeStance, which are subject to known and unknown uncertainties and contingencies outside of LifeStance’s control and which are largely based on our current expectations and projections about future events and financial trends that we believe may affect LifeStance’s financial condition, results of operations, business strategy, and prospects. LifeStance’s actual results, events, or circumstances may differ materially from these statements. Forward-looking statements include all statements that are not historical facts. Words such as “anticipate,” “believe,” “envision,” “estimate,” “expect,” “intend,” “may,” “plan,” “predict,” “project,” “target,” “potential,” “will,” “would,” “could,” “should,” “continue,” “contemplate” and other similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words. These forward-looking statements are subject to a number of risks, uncertainties, factors and assumptions, including, among other things: we may not grow at the rates we historically have achieved or at all, even if our key metrics may imply future growth, including if we are unable to successfully execute on our growth initiatives and business strategies; if we fail to manage our growth effectively, our expenses could increase more than expected, our revenue may not increase proportionally or at all, and we may be unable to execute on our business strategy; if reimbursement rates paid by third-party payors are reduced or if third-party payors otherwise restrain our ability to obtain or deliver care to patients, our business could be harmed; we conduct business in a heavily regulated industry and if we fail to comply with these laws and government regulations, we could incur penalties or be required to make significant changes to our operations or experience adverse publicity, which could have a material adverse effect on our business, results of operations and financial condition; we are dependent on our relationships with affiliated practices, which we do not own, to provide health care services, and our business would be harmed if those relationships were disrupted or if our arrangements with these entities became subject to legal challenges; we operate in a competitive industry, and if we are not able to compete effectively, our business, results of operations and financial condition would be harmed; the impact of health care reform legislation and other changes in the healthcare industry and in health care spending on us is currently unknown, but may harm our business; if our or our vendors’ security measures fail or are breached and unauthorized access to our employees’ patients’ or partners’ data is obtained, our systems may be perceived as insecure, we may incur significant liabilities, including through private litigation or regulatory action, our reputation may be harmed, and we could lose patients and partners; our business depends on our ability to effectively invest in, implement improvements to and properly maintain the uninterrupted operation and data integrity of our information technology and other business systems; our existing indebtedness could adversely affect our business and growth prospects; and our Principal Stockholders control us, and their interests may conflict with ours or yours. The forward-looking statements, together with statements relating to our past performance, should not be regarded as a reliable indicator of our future performance. We undertake no obligation to update any forward-looking statements made in this presentation to reflect events or circumstances after the date of this presentation or to reflect new information or the occurrence of unanticipated events, except as may be required by law. We may not actually achieve the plans, intentions, or expectations disclosed in our forward-looking statements, and you should not place undue reliance on our forward-looking statements. Our forward-looking statements do not reflect the potential impact of any future acquisitions, mergers, dispositions, joint ventures, or investments.

Use of Non-GAAP Financial Measures

In addition to financial measures presented in accordance with U.S. generally accepted accounting principles (“GAAP”), this presentation includes certain non-GAAP financial measures, including Organic Revenue Growth, Center Margin and Adjusted EBITDA. These non-GAAP measures are in addition to, and not a substitute for, or superior to, measures of financial performance prepared in accordance with U.S. GAAP. The non-GAAP financial measures used by LifeStance may differ from the non-GAAP financial measures used by other companies. A reconciliation of these measures to the most directly comparable U.S. GAAP measure is included in the Appendix to these slides or as otherwise described in these slides.

Confidentiality

The presentation and the accompanying oral presentation are strictly confidential and may not be reproduced, forwarded to any person or published, in whole or in part. This presentation may not be downloaded, retained or recorded in any form.

Market and Industry Data

This presentation also contains information regarding our market and industry that is derived from third-party research and publications. This information involves a number of assumptions and limitations. While we believe the information in this presentation is generally reliable, forecasts, assumptions, expectations, beliefs, estimates and projections involve risk and uncertainties and are subject to change based on various factors. References in this presentation to Metropolitan Statistical Area (“MSA”) refer to an area, as defined by the Office of Management and Budget, that has at least one urbanized area of 50,000 or more inhabitants, plus adjacent territory that has a high degree of social and economic integration with the core area as measured by commuting ties.

Today's Presenters



Mike Lester

President, Chief Executive Officer and Co-Founder



J. Michael Bruff

Chief Financial Officer



Danish Qureshi

Chief Growth Officer and Co-Founder



Foundation of a Transformational Mental Health Company



1998 - 2006

Founded Radiant Research

Clinical R&D serving biopharma industry

Acquired by Strategic Buyer (2006)



MICHAEL K. LESTER
Co-Founder / CEO



GWEN H. BOOTH
VP, Early Phase Clinical Development



2007 - 2015

Founded Accelecare Wound Centers

Wound care management solutions for hospitals and healthcare organizations

Recapitalized (2013)
Acquired by Strategic Buyer (2015)



MICHAEL K. LESTER
Co-Founder / CEO



GWEN H. BOOTH
Co-Founder / COO



DANISH J. QURESHI
SVP of Strategic Initiatives /
COO of Post-Acute Division

Discovery Phase

2016

Partnered to Solve the Unmet Need in Mental Health

Deep dive with stakeholders to identify the most impactful ways to tackle disease burden in the healthcare industry

Identified opportunity to expand access in a highly fragmented mental health market



Founded 2017

Founded LifeStance Health

Reimagining mental health through a disruptive, tech-enabled care delivery model built to expand access, address affordability, improve outcomes and lower overall health care costs



MICHAEL K. LESTER
Co-Founder / CEO



GWEN H. BOOTH
Co-Founder / COO



DANISH J. QURESHI
Co-Founder / CGO

We Are Reimagining Mental Health

There is no one face to:

- Depression
- Anxiety
- Bipolar Disorder
- Schizophrenia
- PTSD

There are millions of faces

**We provide compassionate,
comprehensive mental health care,
personalized for each individual**



We Are Mission-Driven

Our Vision

A truly healthy society where mental and physical healthcare are unified to make lives better

Our Mission

To help people lead healthier, more fulfilling lives by improving access to trusted, affordable, and personalized mental healthcare

Our Values

Delivering Compassion
We care for people unconditionally and act with empathy always

Building Relationships
We are collaborative, building enduring relationships to achieve more together

Celebrating Difference
We respect the diversity of every individual's lived experiences

Building the Leading Outpatient Mental Health Platform



National Platform with Unmatched Scale

Located in **73** MSAs in **27** states as the leading national provider ⁽¹⁾



Employed Clinician Model

3,300+ employed composed of psychiatrists, APNs, psychologists and therapists ⁽¹⁾



Disruptive Tech-Enabled Platform

80 patient net promoter score ⁽⁴⁾ and **80%** digital engagement executing hybrid virtual and in-person care model



In-Network Reimbursement

100% of commercial revenue in-network with over **200** payors



Outcomes Tracking

Digitally tracked outcomes, e.g., **81%** reduction in suicidal ideation ⁽⁵⁾



Proven, Predictable Unit Economics & Profitability

2x de novo ROIC in **18** months on average ⁽⁶⁾

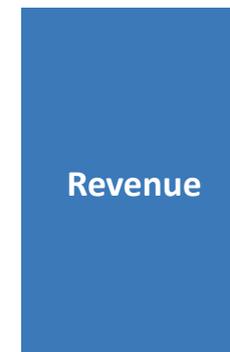


Sustained Revenue Growth

41% organic growth in 2020 ⁽⁷⁾

Notes:

1. As of March 31, 2021
2. Calculated based on data as of fiscal year end
3. Pro forma revenue for the year ended December 31, 2020, giving pro forma effect to the TPG Acquisition
4. NPS defined as "Net Promoter Score" refers to a measure of patient satisfaction widely used in the behavioral health care industry, calculated based on responses to patient surveys administered following a patient's appointment from January 14, 2021 through March 31, 2021
5. Reported after two visits to treat the condition
6. Based on Company estimates
7. Organic revenue growth defined as the change in total revenue, excluding revenue from acquisitions for the first twelve months following the date of acquisition of new centers. Calculated based on pro forma revenue for the year ended December 31, 2020, giving pro forma effect to the TPG Acquisition



Mental Illness Is an Enormous and Growing Crisis

Large Number of Americans Living with Mental Illness ⁽¹⁾

51M

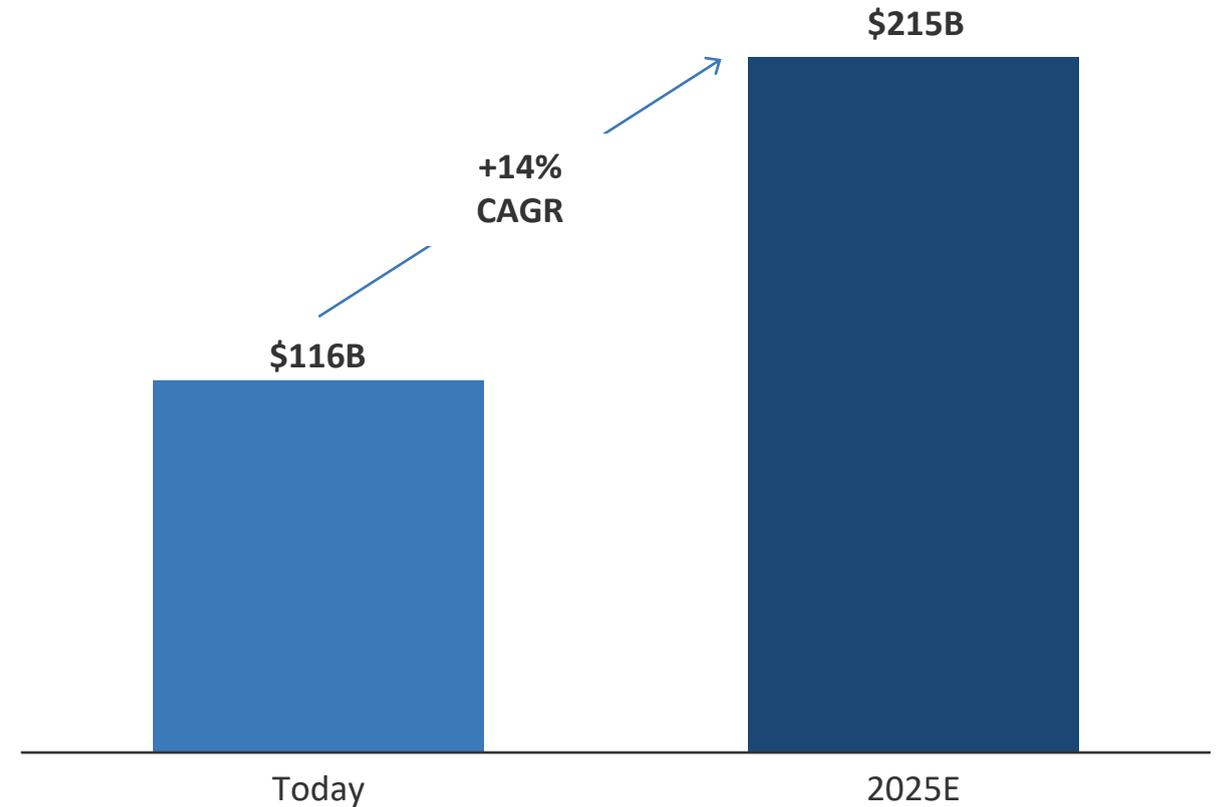
High Cost to Employers for 217M Lost Work Days ⁽²⁾

\$17B

Increase in Overall Medical Costs for Patients Suffering Ongoing Mental Health Illness ⁽³⁾

50-100%

Outpatient Mental Health TAM ⁽⁴⁾



Notes:

1. NIMH, data as of 2019

2. Center for Prevention and Health Services estimate

3. JAMA Network Open, Company estimates

4. Calculation of our total addressable market for outpatient mental healthcare in the U.S. of approximately \$116B reflects our estimate based on data derived from third-party industry reports as well as claims data analysis. Our estimate is calculated based on (i) the estimated spend on outpatient mental healthcare in the U.S. for 2020, plus (ii) the estimated spend on mental health patients in the U.S. who are unserved and underserved, plus (iii) the estimated spend on patients in the U.S. who are unaware that they need treatment but have unmet mental health needs that are otherwise commercially addressable. "Today" as of 2020

We Founded LifeStance to Solve These Challenges

Only 27% of Mental Health Needs Are Met ⁽¹⁾

Mental Health Today



Lack of Access

- Up to **2 months** wait to receive treatment ⁽¹⁾
- Less than **50%** of adults with a mental illness receive treatment ⁽²⁾

- Virtual and in-person visits
- Data-driven personalized care

Lack of Affordability

- **~50%** of outpatient clinicians do not accept commercial insurance ⁽³⁾
- **1 in 4** patients reported choosing between care and daily necessities ⁽⁴⁾

- 100% of commercial revenue in-network
- Multiple national payor contracts

Lack of Scale and Organization

- Over **95%** of clinicians practice as independent providers ⁽⁵⁾
- Limited investments in critical operations, technology and digital infrastructure

- Digital tools to facilitate care
- Collegial working environment

Lack of Care Coordination

- Primary care clinicians have limited access to comprehensive services
- **63M** ER visits annually related to mental health conditions ⁽⁶⁾

- Co-located with primary care
- Clinical outcomes tracking

Notes:

1. Kaiser Family Foundation estimates up to 1-2 months wait times
2. Company data estimates as of 2019
3. "Acceptance of Insurance by Psychiatrists and the Implications for Access to Mental Health Care" cited by Harvard Medical School

4. National Council for Behavioral Health survey as of 2018
5. JAMA Psychiatry and Company estimates
6. IBISWorld, data over the past three years

By Transforming Mental Health for All Key Stakeholders

Patients

Provide access to convenient, affordable, high-quality care

2.3M visits in 2020

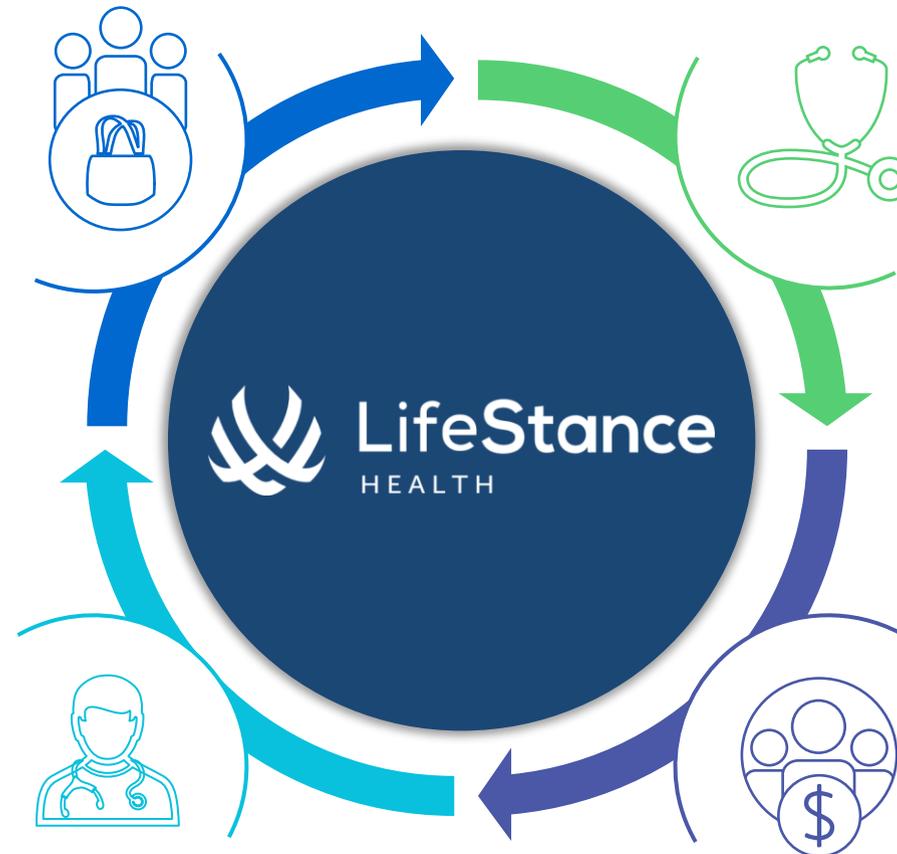
81% improvement in suicidal ideation ⁽¹⁾

Referring Physicians

Coordinated referral system for primary care physicians

2,100+ partnerships

~50 co-locations



Clinicians

Empowered to improve the lives of their patients

87%+ retention rate compared to 77% industry average

97% believe they are positively assisting their patients to live a healthier life

Payors

Improve outcomes and reduce medical costs

200+ in-network relationships

100% payor renewal rate ⁽²⁾

We Have a Seamless Hybrid Care Model

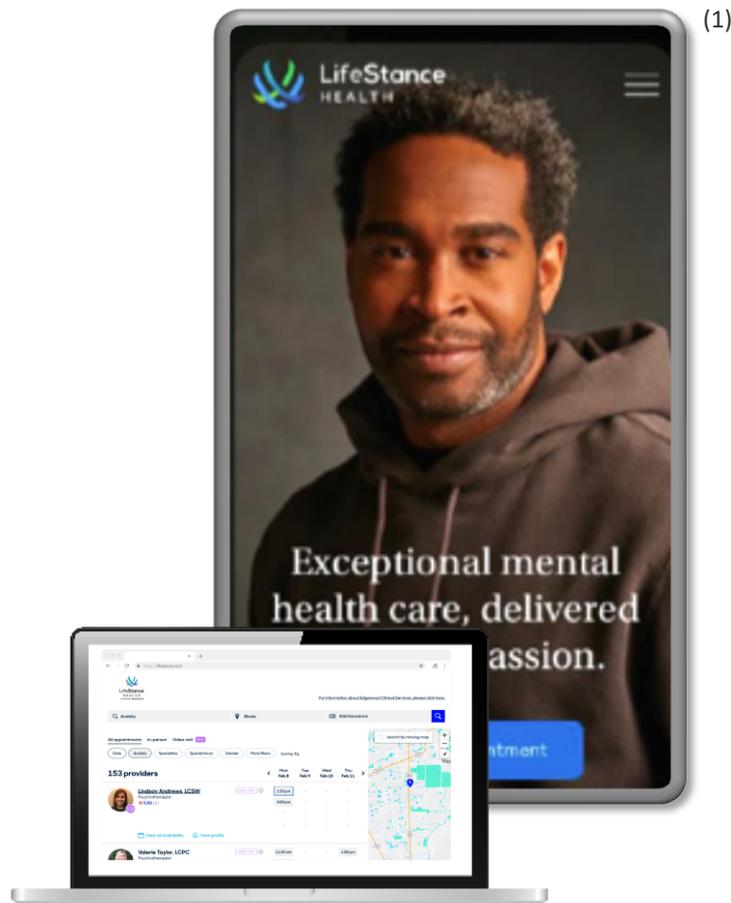


PATIENTS

Virtual

Hybrid Care Model

In-Person



Providing patients a choice in their medium of care or a **combination of both**

Range of digital tools to manage care and communicate with the clinician

Guide patients through the care journey, from personalized onboarding to ongoing customer support

Certain patients and conditions may benefit from regular **in-person treatment**

Hybrid model **reduces no-show rates** increasing care continuity



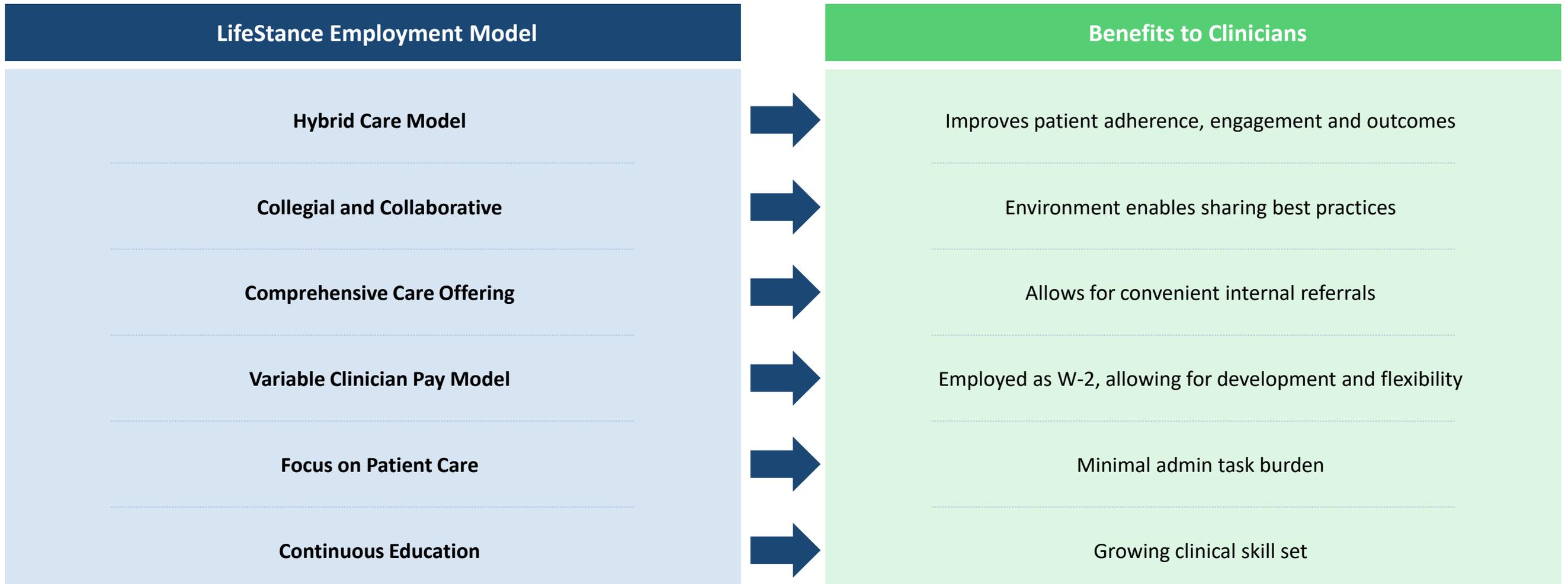
80 Patient NPS ⁽²⁾



We Have Created an Optimal Work Environment for Clinicians



CLINICIANS



Over **87%** Retention Compared with Industry Average of **77%** ⁽¹⁾

97% believe they are positively assisting their patients



We Are a Valuable Partner to Payors Nationwide

Multiple National Payor Contracts to Power Growth

Clearly Defined Payor Value Proposition

- Outpatient 9x lower cost than inpatient
- National base of highly qualified clinicians
- Optimized mix of psychiatry and therapy
- Measurable outcomes data
- Suite of comprehensive clinical services
- Stronger member and client value proposition



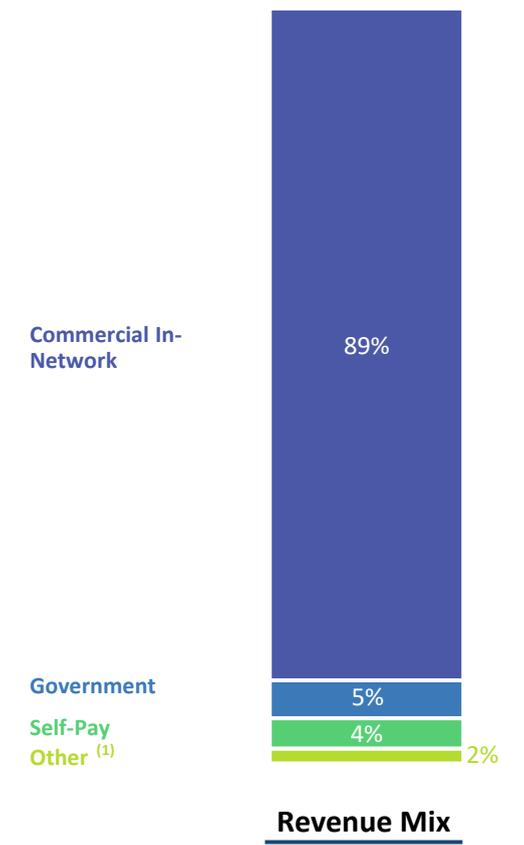
100% Payor Renewal Rate ⁽²⁾

Over 200 National, Regional and Local Payor Contracts

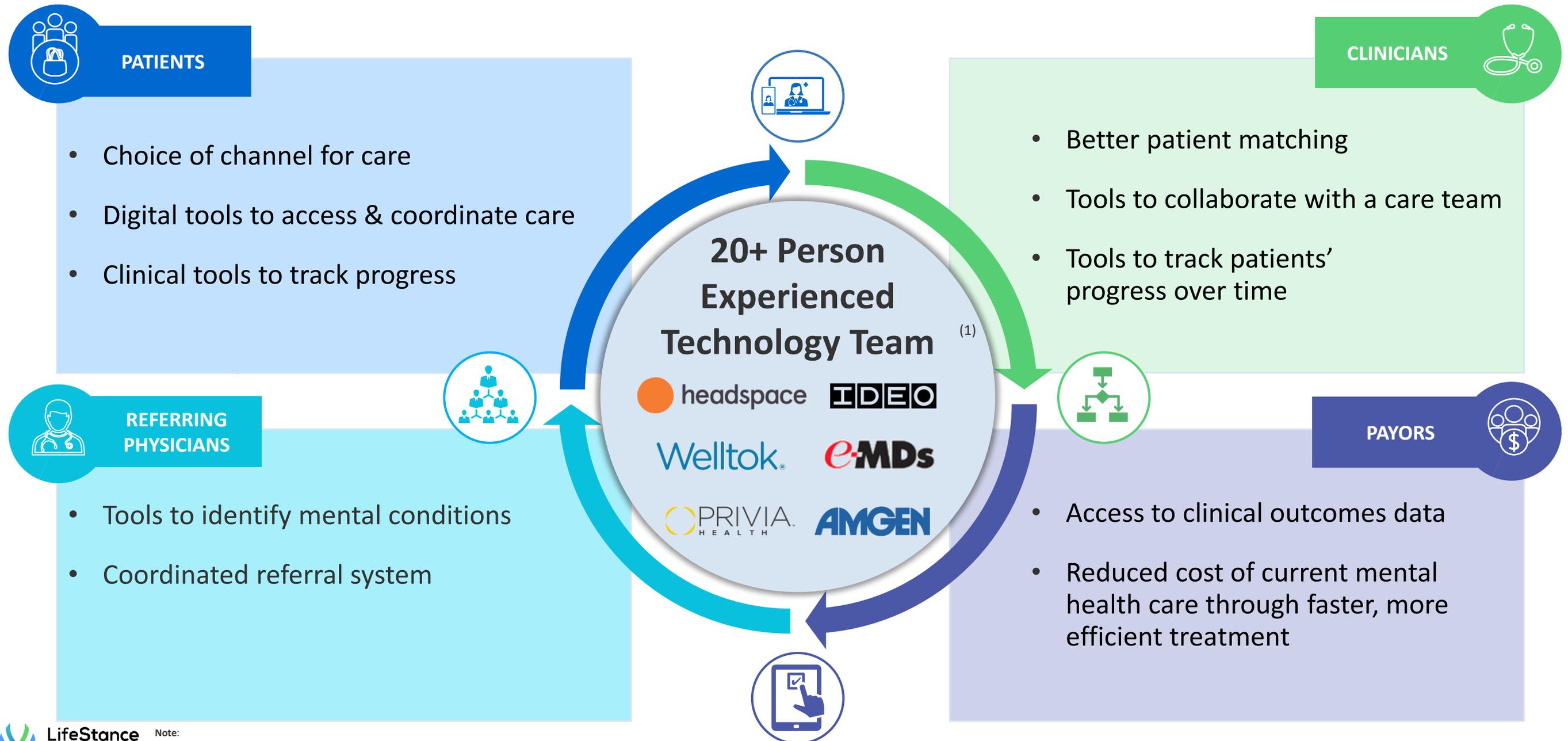


“Our members get better [with LifeStance] more quickly than other providers, often in a third of the time”
- National Payor A

“LifeStance’s technological investments in outcomes tracking are truly innovative in mental healthcare”
- National Payor B



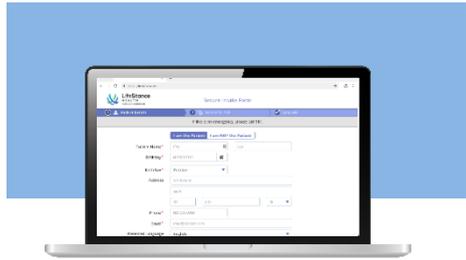
Our Disruptive Tech-Enabled Model Benefits All Stakeholders



Through a Powerful Suite of Versatile Digital Tools

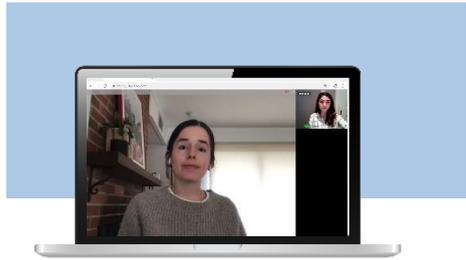
OPTIONS FOR ACCESS

-  Clinician biographies online
-
-  Guided clinician matching
-
-  Online scheduling



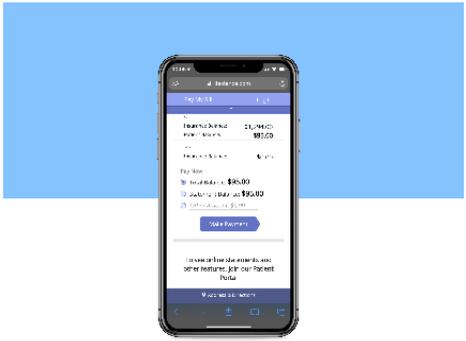
CHANNEL OF CHOICE

-  In-person sessions
-
-  Virtual sessions
-
-  Dual capability to meet all patient mental health needs



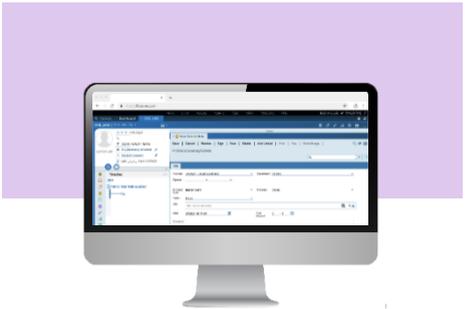
ALL-IN-ONE SUPPORT

-  Comprehensive patient portal
-
-  Online prescription refill request
-
-  Online messaging



COLLABORATIVE CARE

-  Psychiatric and psychotherapist clinicians all in house
-
-  Easy internal referrals and communication
-
-  Shared EHR



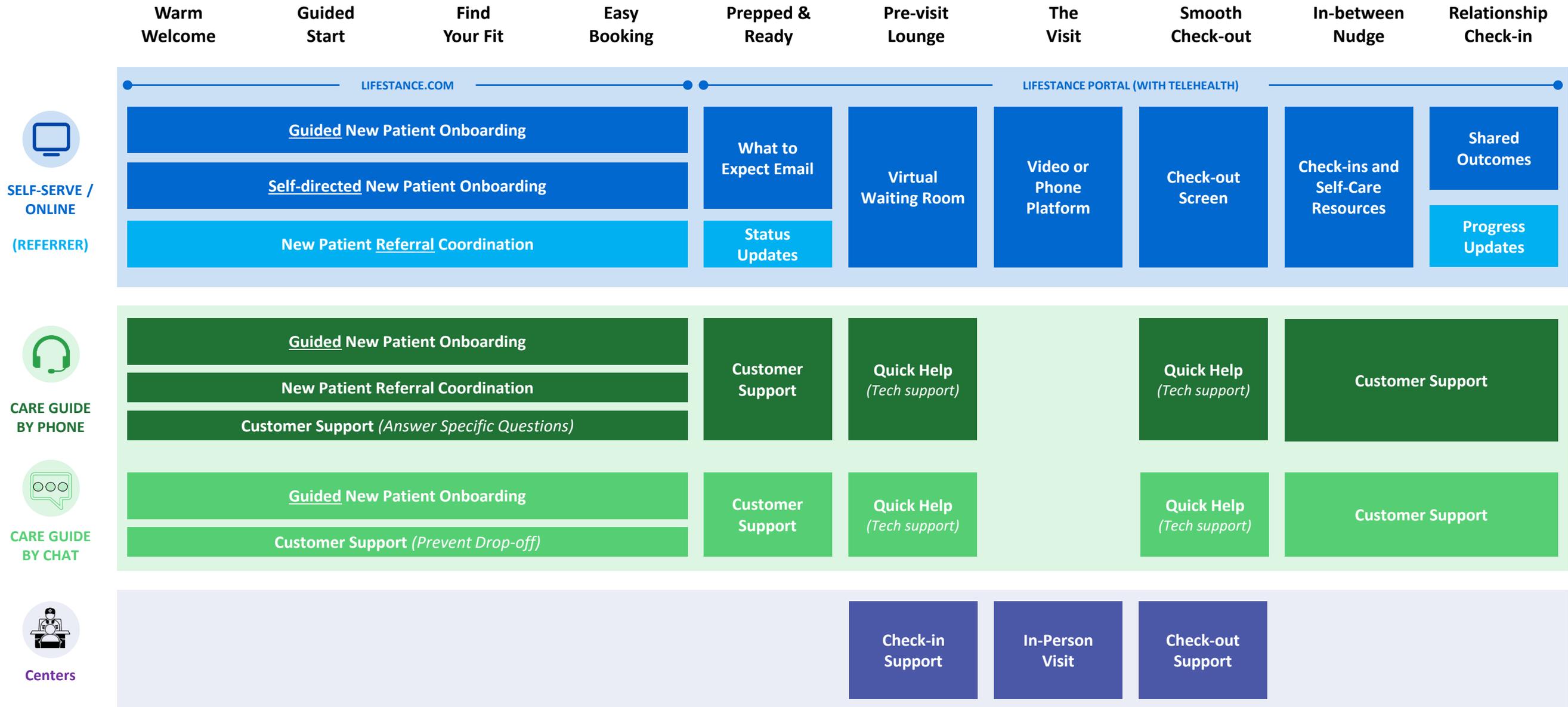
OUTCOMES – TRACKED CARE

-  Clinician access to outcomes
-
-  Clinician communication with patient on clinical outcomes
-
-  Accessible for referring primary care physicians



We Are Building a Digitally-Enabled Experience Across Channels

DIGITAL
NEAR-TERM



We Have Built the Team to Deliver

Highly Experienced Leadership Team with Expertise in Healthcare and Technology



Michael K. Lester
President & Chief Executive Officer
Co-Founder




J. Michael Bruff
Chief Financial Officer




Danish J. Qureshi
Chief Growth Officer
Co-Founder




Gwen H. Booth
Chief Operating Officer
Co-Founder




Pablo Pantaleoni
Chief Digital Officer




Kevin M. Mullins
Chief Development Officer




Anisha Patel-Dunn
Chief Medical Officer




Warren Gouk
Chief Administrative Officer




Ryan Pardo
Chief Legal Officer




Felicia Gorcyca
Chief People Officer



2017
FOUNDED

4,915
EMPLOYEES ⁽¹⁾

Mission

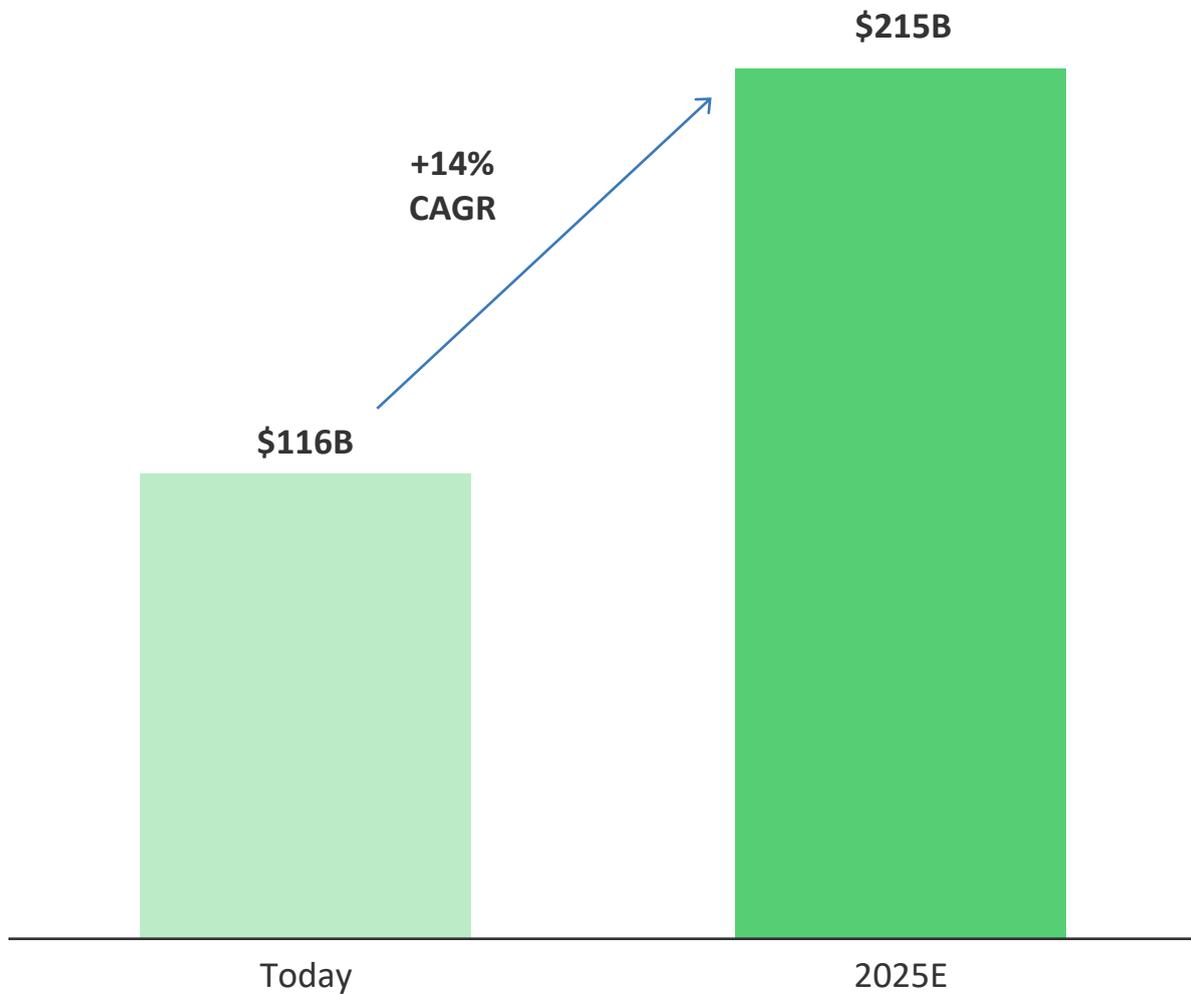
To help people lead healthier, more fulfilling lives by improving access to trusted, affordable, and personalized mental healthcare



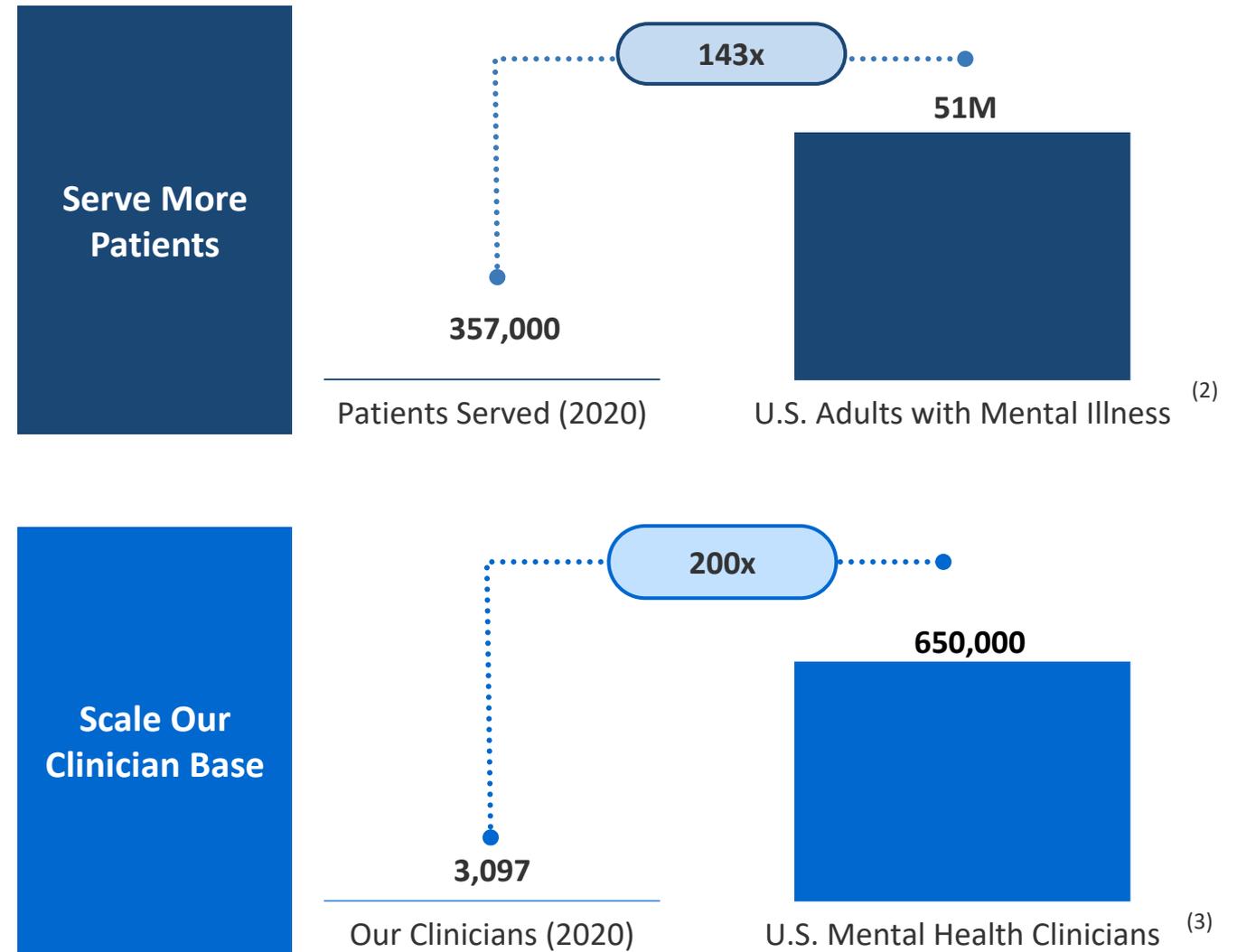
Growth Opportunities

Significant Runway within a Massive Market

Outpatient Mental Health TAM ⁽¹⁾



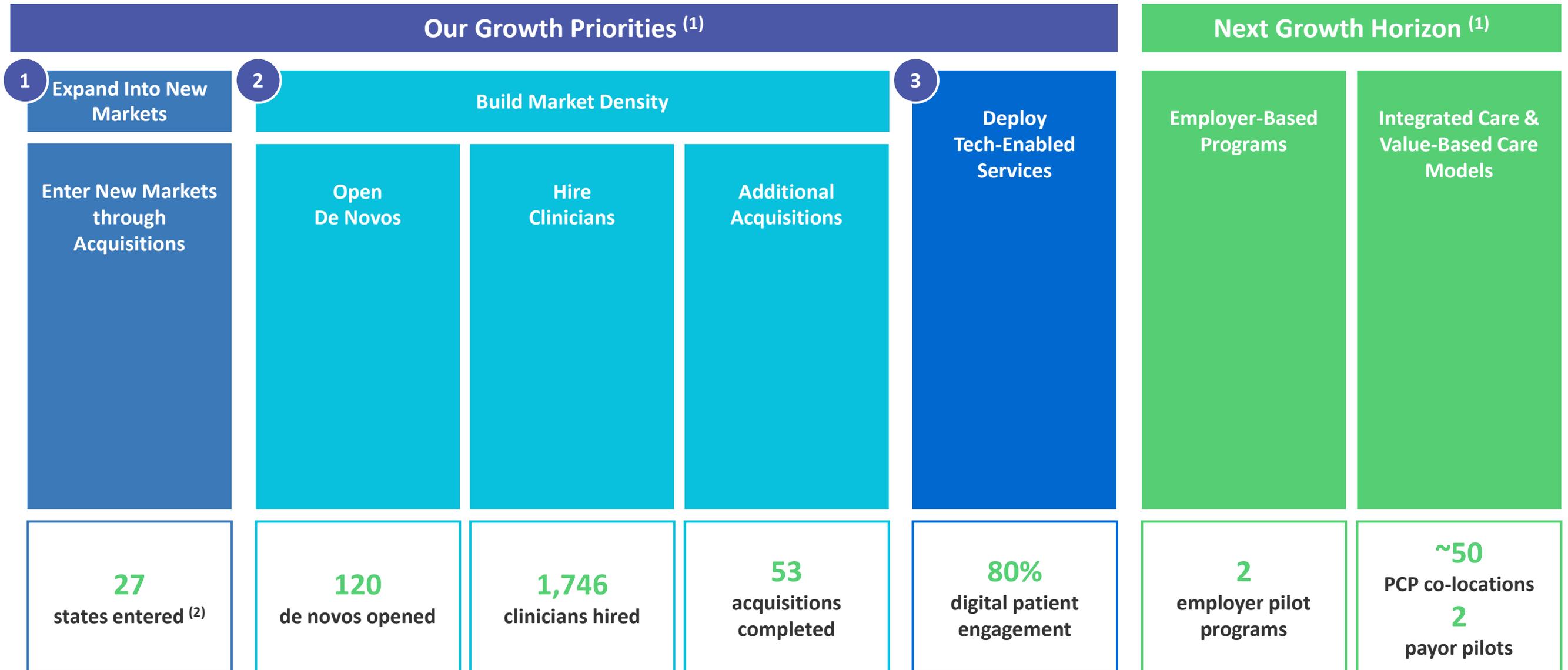
Significant Runway in the Market



Notes:

1. Calculation of our total addressable market for outpatient mental healthcare in the U.S. of approximately \$116B reflects our estimate based on data derived from third-party industry reports as well as claims data analysis. Our estimate is calculated based on (i) the estimated spend on outpatient mental healthcare in the U.S. for 2020, plus (ii) the estimated spend on mental health patients in the U.S. who are unserved and underserved, plus (iii) the estimated spend on patients in the U.S. who are unaware that they need treatment but have unmet mental health needs that are otherwise commercially addressable. "Today" as of 2020
2. Representative of U.S. individuals as of year-end 2019
3. Company estimates for year-end 2020

Our Growth Strategy

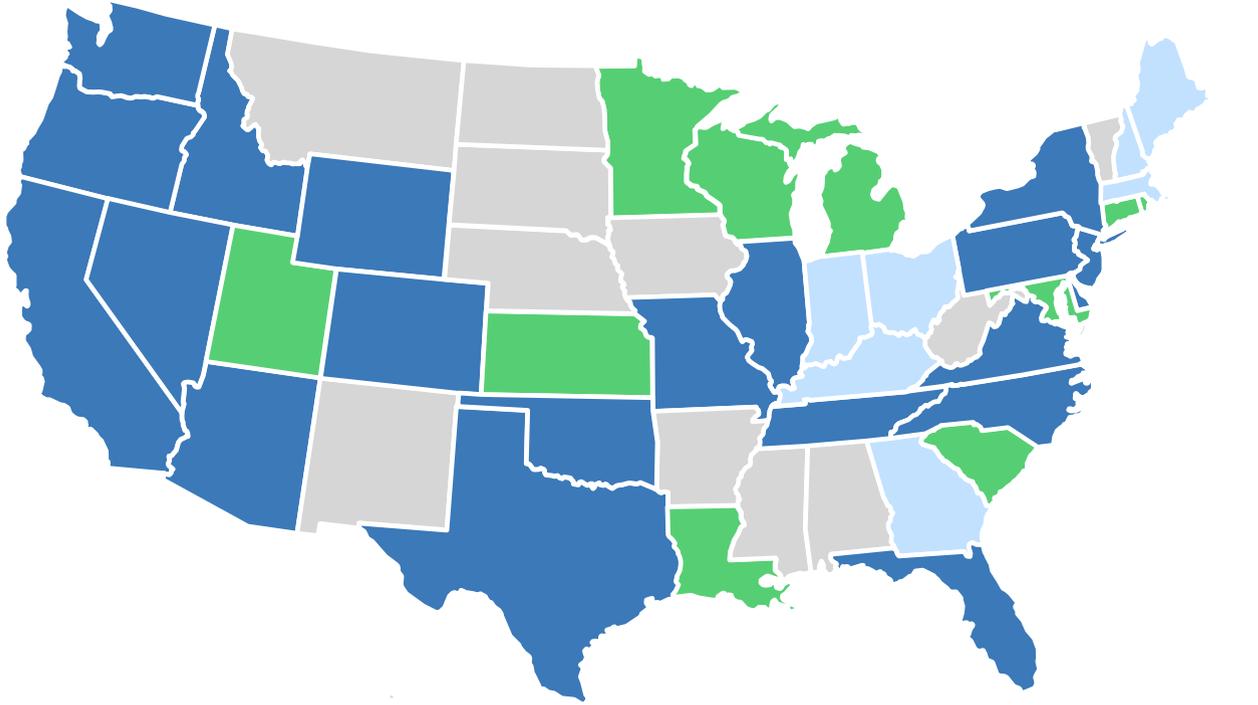


How We Evaluate and Prioritize New Markets

Core Market Assessment Metrics

- A Patient Population Demographics**
Population, income, density, and mental illness prevalence
- B Recruiting Opportunity**
Number of mental health clinicians by type
- C Payor Concentration**
Diversified group of regional and national payors
- D Prevalence of Acquisition Targets**
Outpatient mental health practices/groups that are interdisciplinary or focused on psychiatry and accept primarily commercial insurance

Near-Term Pipeline of Expansion Markets



	2017	Today ⁽¹⁾	Near-Term ⁽²⁾
States	7	27	37
MSAs	14	73	101

Powerful Organic Growth Engine

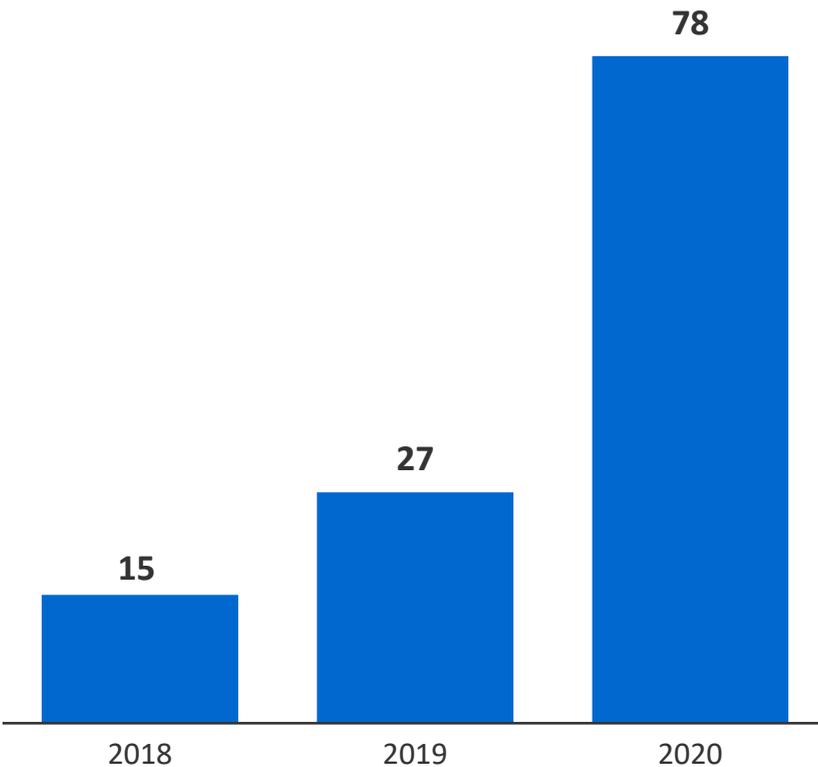


Build De Novos

Expand our market presence through new build centers

120 de novos ⁽¹⁾

De Novo Centers Opened Per Year

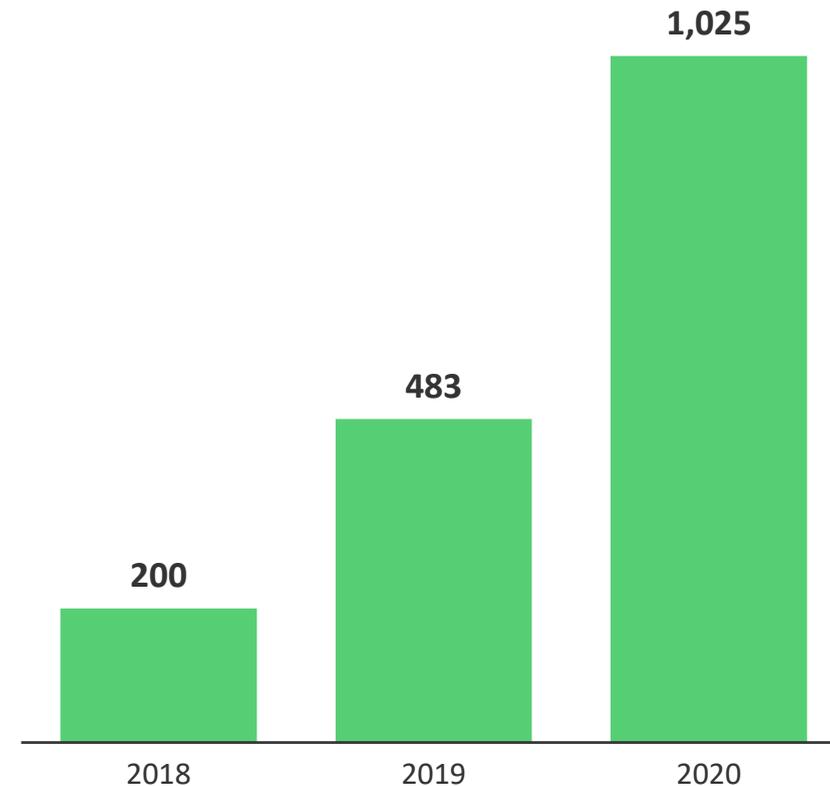


Hire Clinicians ⁽²⁾

Hire clinicians to expand patient visit capacity

1,746 clinicians ⁽¹⁾

Clinician Hires Per Year



Powerful Organic Growth ⁽³⁾

41%

2020 Organic Revenue Growth

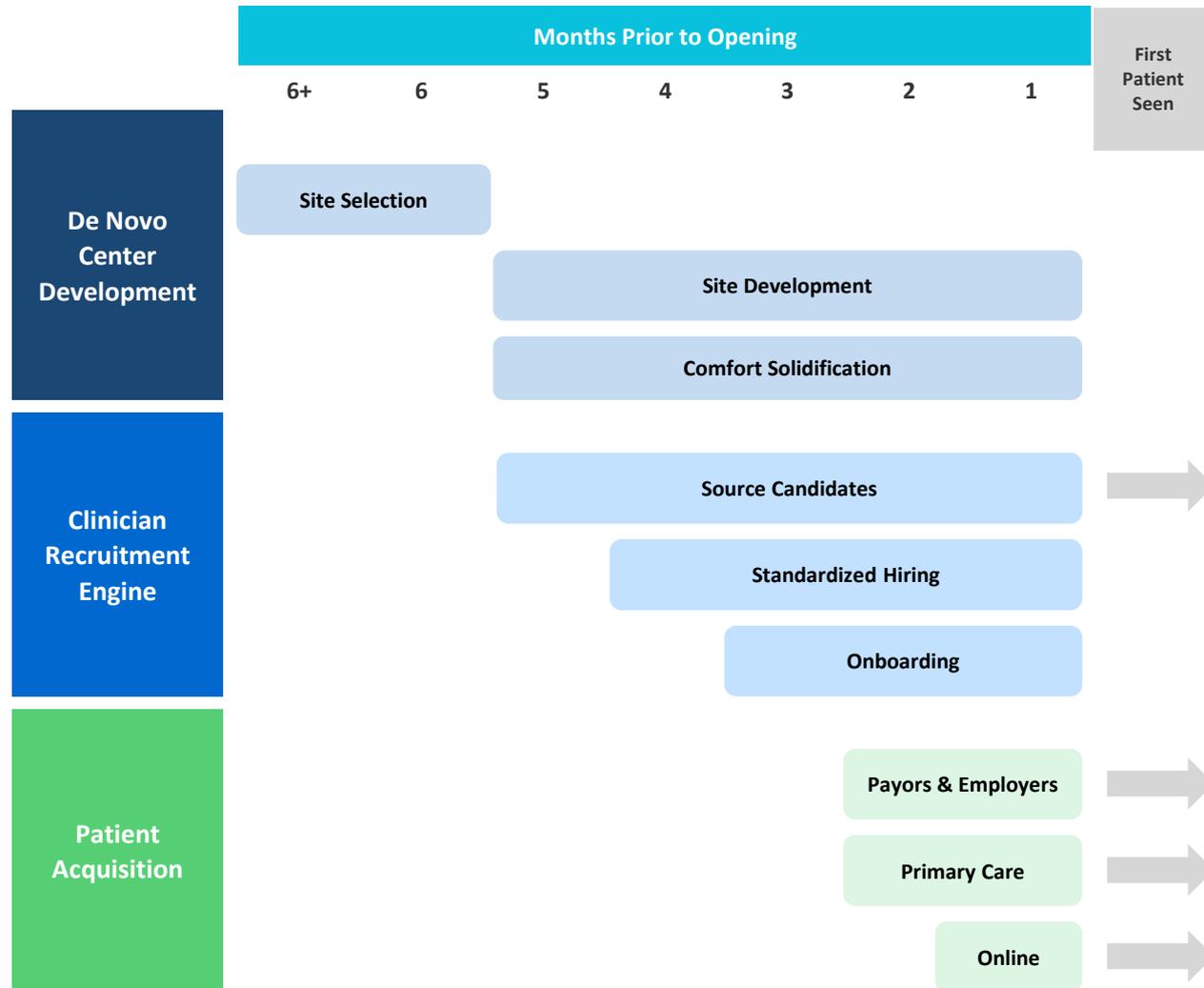


Notes:

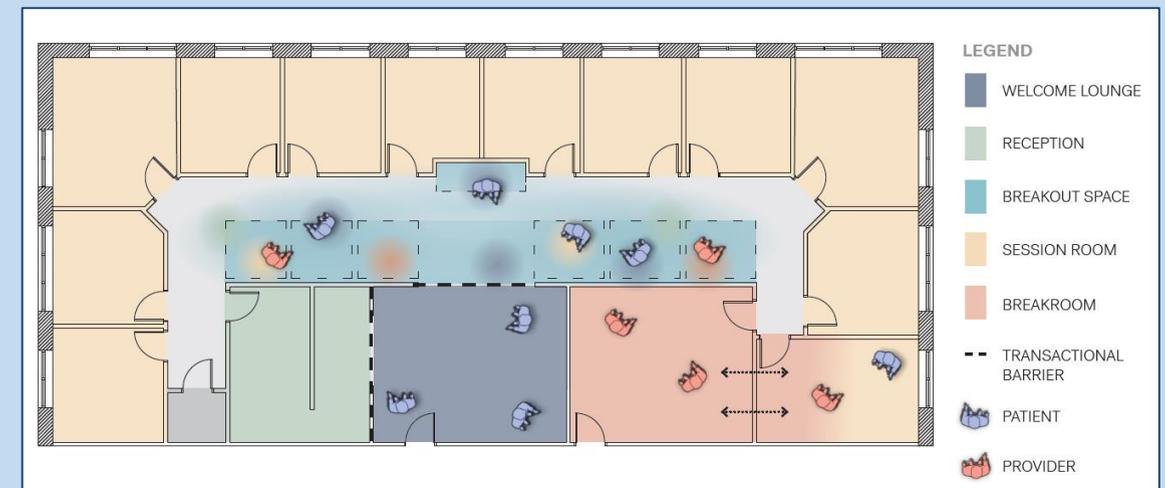
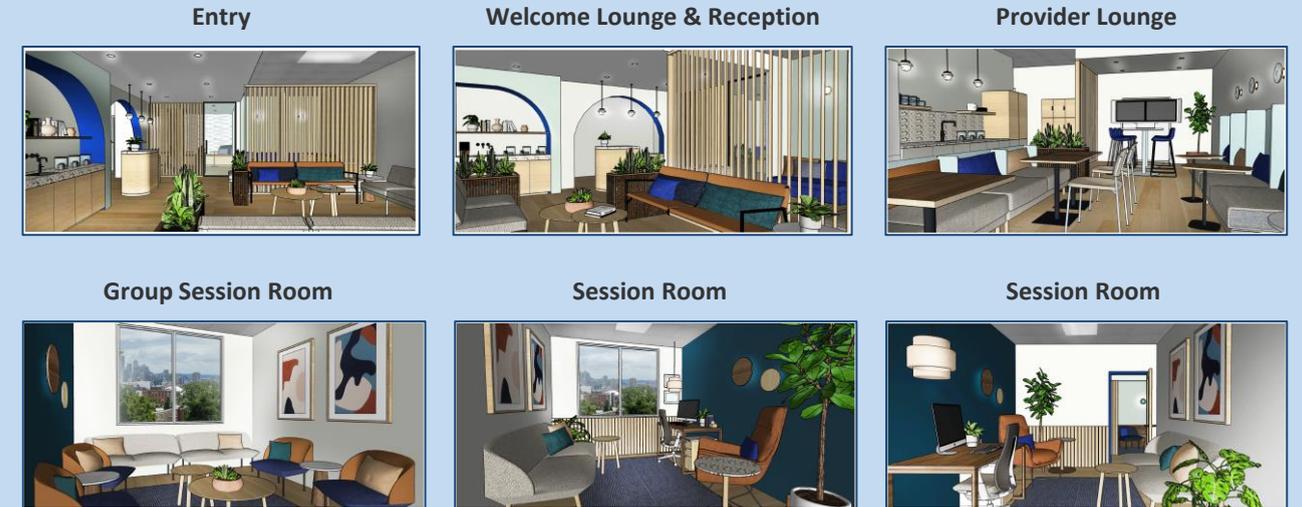
1. Since inception in 2017 through year-end 2020
2. Total hired clinicians excludes clinicians gained through acquisitions.
3. Organic revenue growth defined as the change in total revenues, excluding revenues from acquisitions for the first twelve months following the date of acquisition of new centers. Calculated based on pro forma revenue for the year ended December 31, 2020, giving pro forma effect to the TPG Acquisition

Systematic Approach to De Novo Builds

Consistent & Repeatable Process

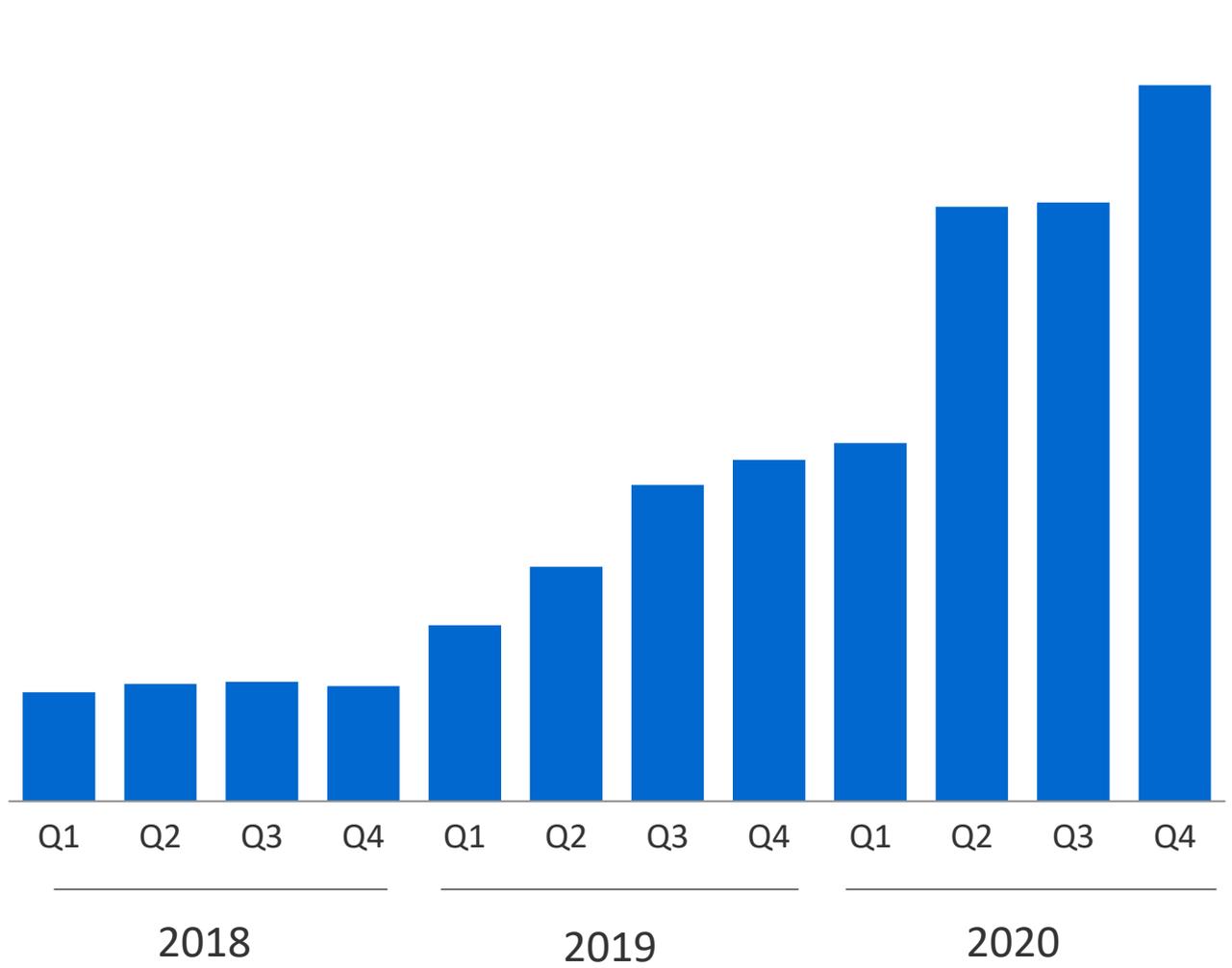


Building a National Brand Through Evidence-Based Design (1)



Successful Clinician Recruitment Engine

~1,750 Clinicians Hired Since Inception ⁽¹⁾



Well Defined Recruitment Playbook

18 Person National Clinician Recruitment Team

- ✓ Built for Speed to Close and Efficiency
- ✓ Rigorous Quality Screening Process
- ✓ Competitive Compensation Structure
- ✓ Long-Term Agreements with Evergreen Renewals
- ✓ Proprietary Database and Clinician Outreach

Digital Capabilities Power Our Growth

Digital Tools to Enable Access

OPTIONS FOR ACCESS

- ✓ Clinician bios online
- ✓ Guided clinician matching
- ✓ Online scheduling



CHANNEL OF CHOICE

- ✓ Hybrid care model
- ✓ Dual capability to meet all needs



ALL-IN-ONE SUPPORT

- ✓ Patient portal
- ✓ Online messaging and Rx refill



COLLABORATIVE CARE

- ✓ Shared EHR
- ✓ Easy internal referral and communication



OUTCOMES – TRACKED CARE

- ✓ Outcomes tracking tools and data
- ✓ Accessible for payors and PCPs



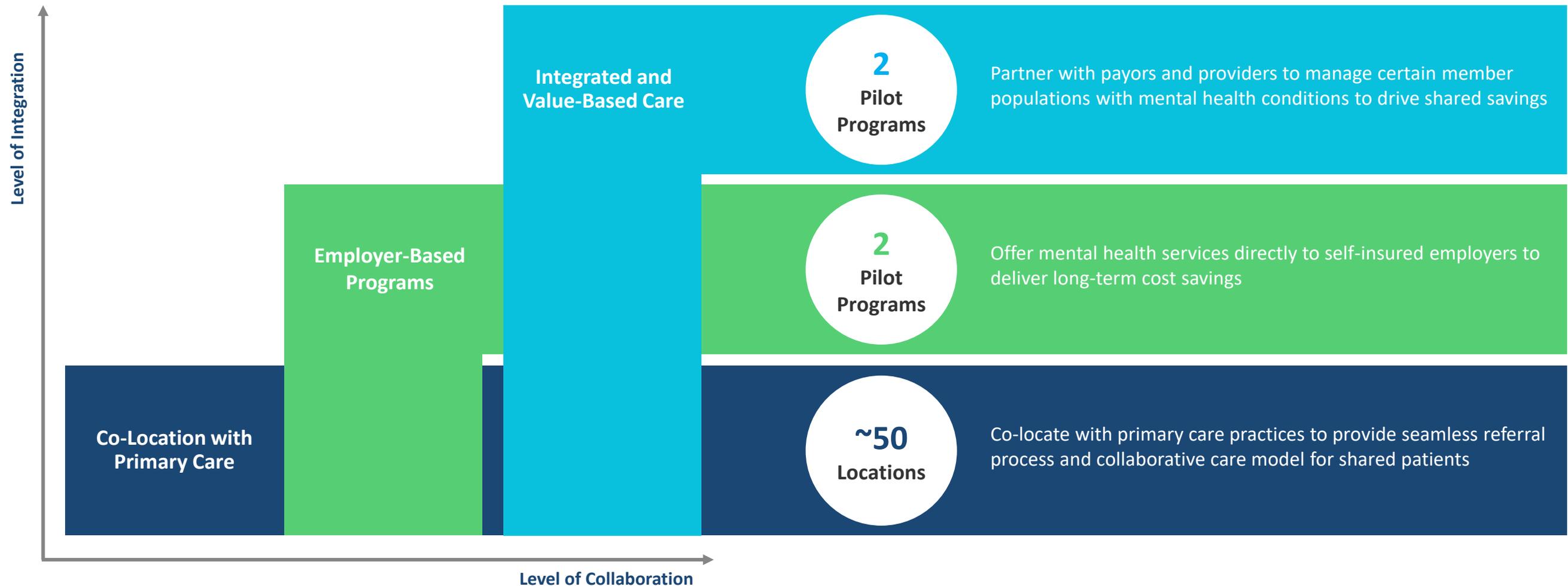
Digital Tools to Drive Patient Engagement

- **Creates access** for population throughout the entire state (outside designated MSAs)
- **Expand clinician capacity** through increased efficiency
- **Strengthens our partnerships** with payors and referring physicians
- Enables us to expand into new care models such as **value-based care**
- Hybrid care model improves treatment **adherence** and patient **engagement**

Opportunity to Transform Healthcare as a Whole

Next Growth
Horizon

Every Dollar Spent on Collaborative Mental Health Care Drives 6.5x Total Medical Cost Savings ⁽¹⁾





Financial Overview

Differentiated Track Record of Growth

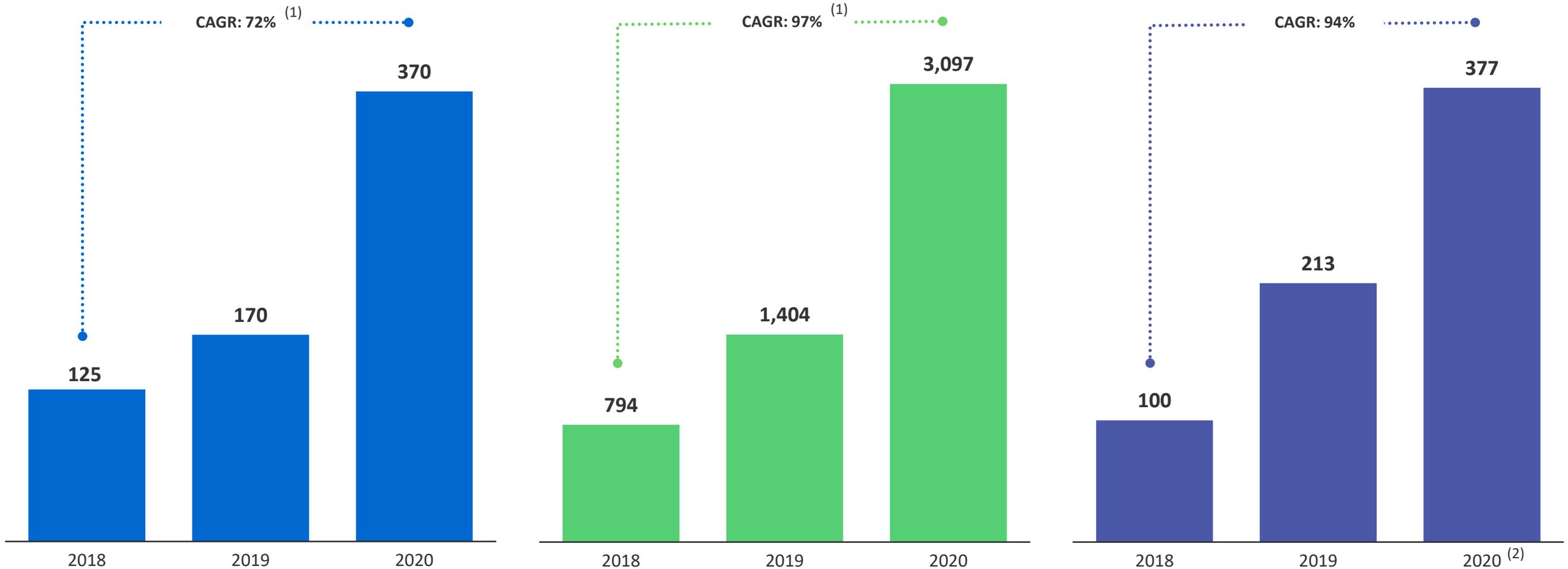
Centers



Clinicians



Revenue
(\$M)



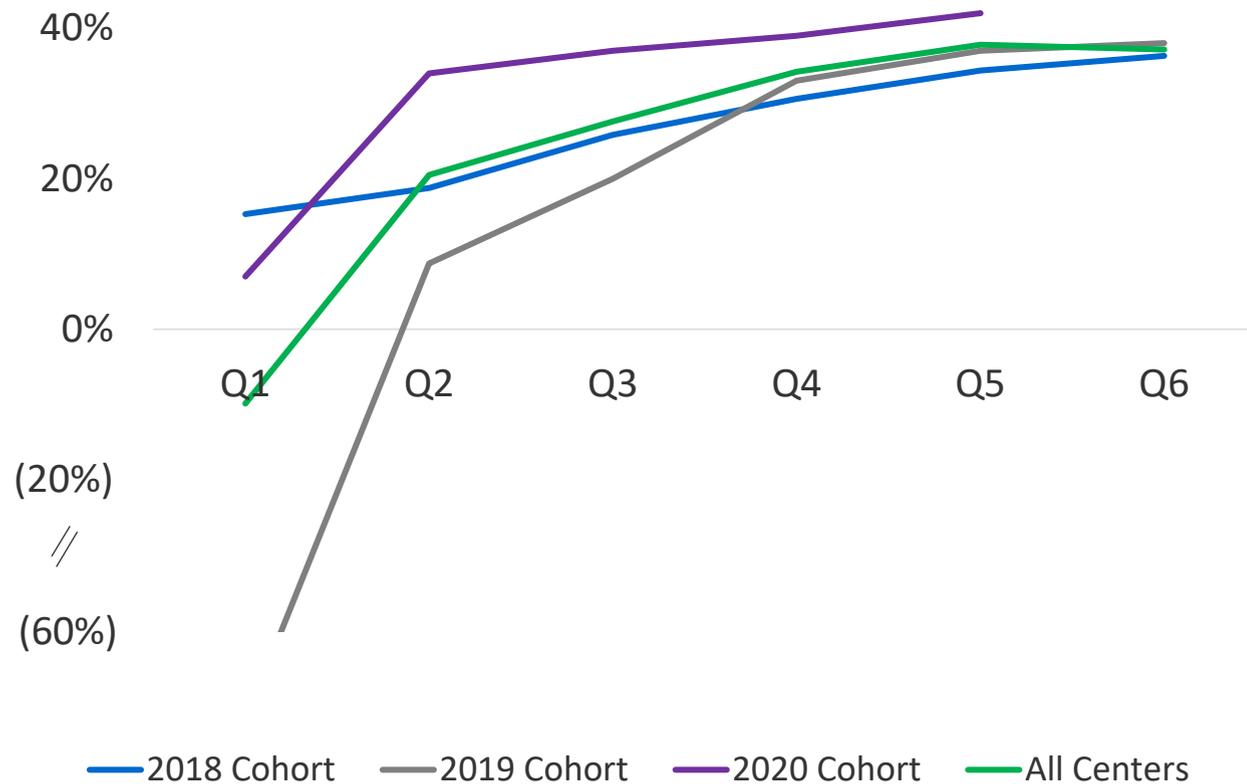
Notes:

- 1. Calculated based on data as of fiscal year end
- 2. Pro forma revenue for the year ended December 31, 2020, giving pro forma effect to the TPG Acquisition

Proven, Predictable Unit Economics

De Novo Level Center Margin by Cohort ⁽¹⁾⁽²⁾

(%)



Notes:

- 1. Excludes pre-revenue periods and presents Center Margin over time for cohorts, measured after each center is opened
- 2. Center Margin defined as income (loss) from operations excluding depreciation and amortization and general and administrative expenses. Reconciliation of Center Margin to its closest GAAP measure is provided in the appendix hereto. 2019 Cohort includes one new market entry at which clinicians are paid a fixed salary
- 3. Operating and financial metrics based on actual mature locations for 2018 de novos
- 4. Since inception in 2017



**Sophisticated De Novo Model
with Predictable Results ⁽³⁾**

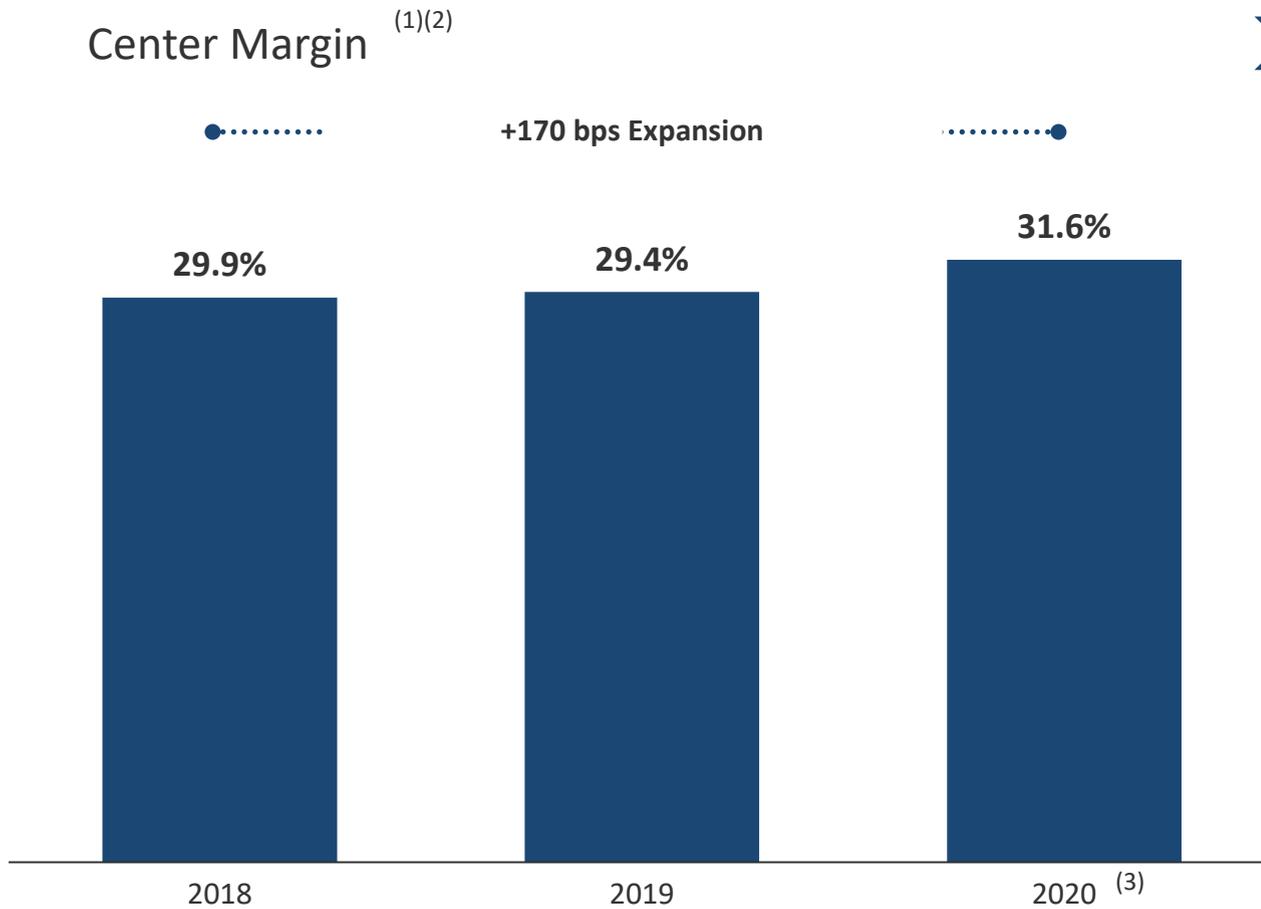
Avg. Time to Breakeven	2-4 months
Avg. Payback Period	~13 months
Avg. Time to Maturity	18 months

2x ROIC within 18 months

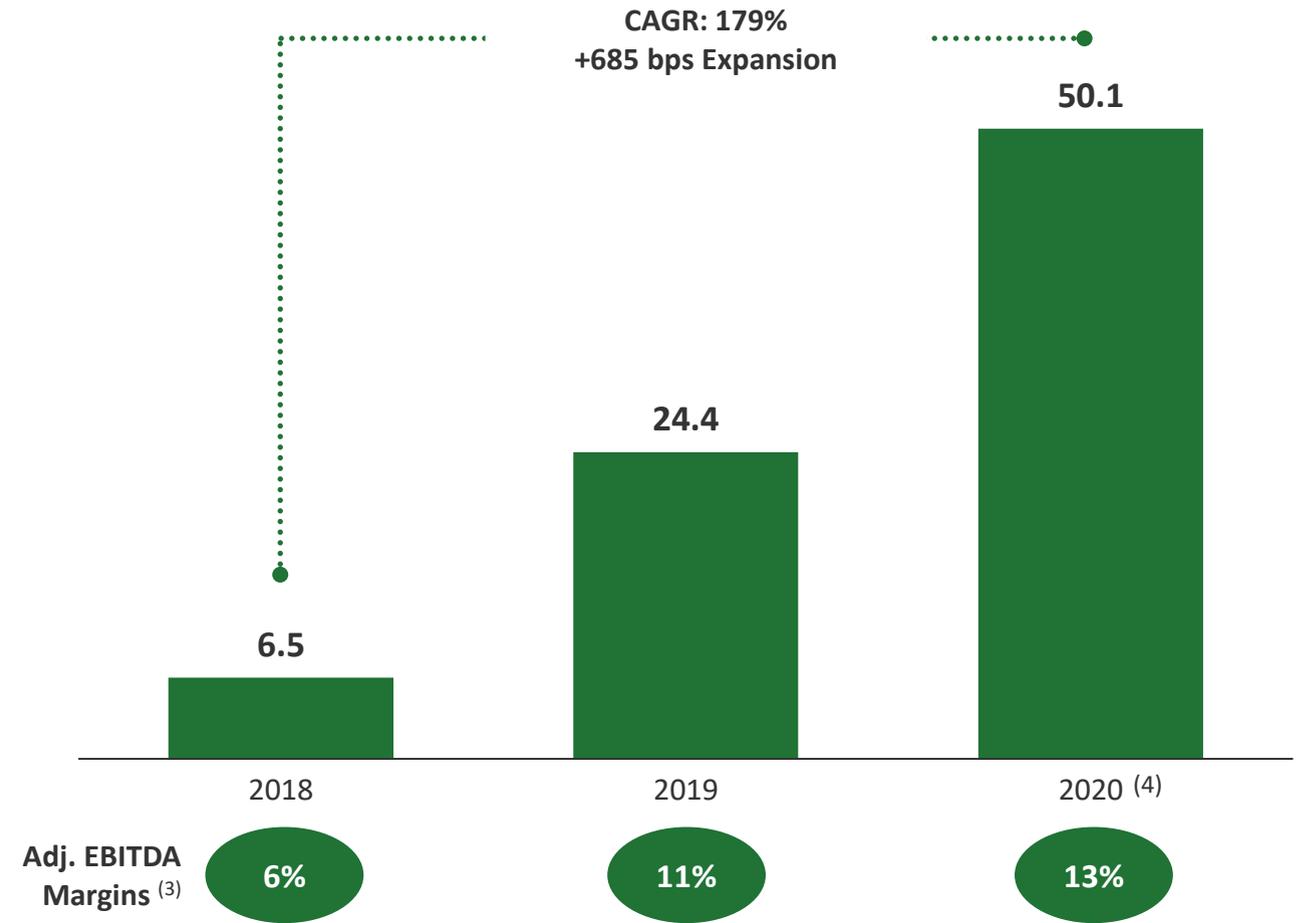
120 De Novos Opened ⁽⁴⁾

Driving Growing Profitability

Center Margin ⁽¹⁾⁽²⁾



Adjusted EBITDA ⁽³⁾ (\$M)



Notes:

1. As a percent of total revenue

2. Center Margin defined as income (loss) from operations excluding depreciation and amortization and general and administrative expenses. Reconciliation of Center Margin to its closest GAAP measure is provided in the appendix hereto

3. Adjusted EBITDA defined as net income (loss) excluding interest expense, depreciation and amortization, provision (benefit) for income taxes, gain (loss) on remeasurement of contingent consideration, unit-based compensation, management fees, loss on disposal of assets, transaction costs and other expenses. Adjusted EBITDA margin defined as Adjusted EBITDA margin divided by total revenue. Reconciliation of Adjusted EBITDA to its closest GAAP measure is provided in the appendix hereto

4. Gives pro forma effect to the TPG Acquisition

Positive Momentum Continuing Into 2021

Clinicians



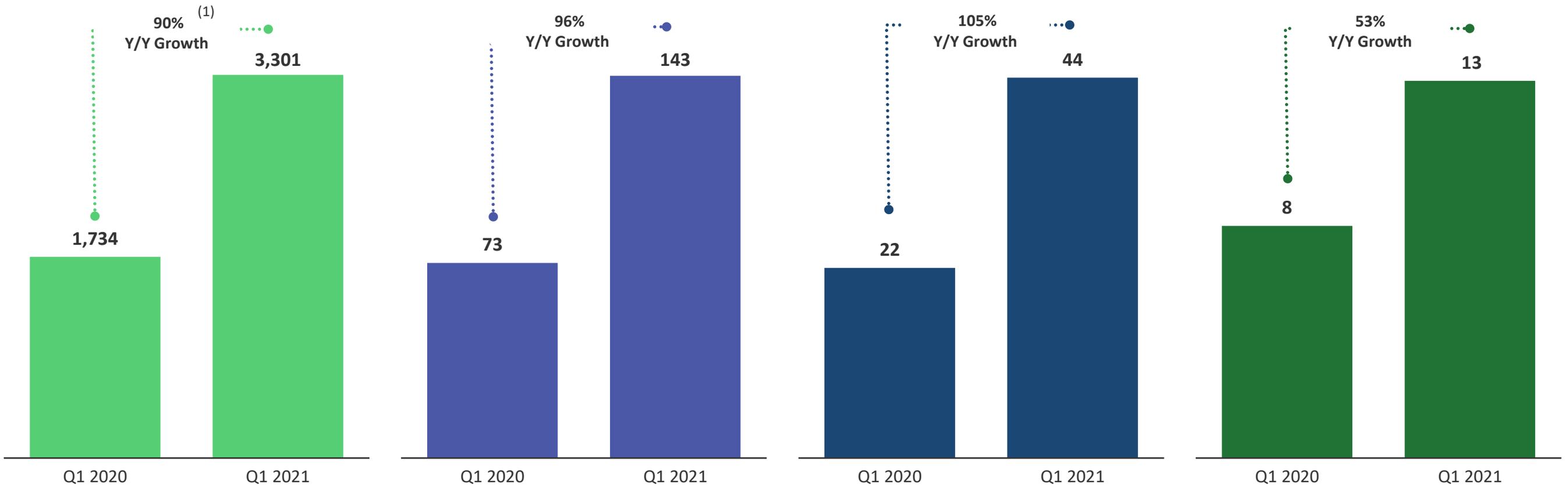
Revenue (\$M)



Center Margin (\$M)⁽²⁾



Adj. EBITDA (\$M)⁽³⁾



~1,600
Clinicians added in 12 months

Continued expansion into new markets and building market density

Increased clinicians and de novo mix

\$4.4M+
while investing in growth and infrastructure

Notes:

1. Calculated based on data as of March 31, 2021
2. Center Margin defined as income (loss) from operations excluding depreciation and amortization and general and administrative expenses. Reconciliation of Center Margin to its closest GAAP measure is provided in the appendix hereto
3. Adjusted EBITDA defined as net income (loss) excluding interest expense, depreciation and amortization, provision (benefit) for income taxes, gain (loss) on remeasurement of contingent consideration, unit-based compensation, management fees, loss on disposal of assets, transaction costs and other expenses. Adjusted EBITDA margin defined as Adjusted EBITDA margin divided by total revenue. Reconciliation of Adjusted EBITDA to its closest GAAP measure is provided in the appendix hereto

Long-Term Operating Model Targets

LONG-TERM TARGET GOALS ⁽¹⁾

COMMENTARY

REVENUE
GROWTH

~30%

- Significant TAM with large runway and playbook to execute



CENTER
MARGIN ⁽²⁾

35% to 40%

- Proven and predictable unit economics sustain the underlying profitability of our centers
- Digital tools increase our capacity



ADJ. EBITDA
MARGIN

~25%

- Growth and operating leverage drives our profitability



Notes:

1. The targets described on this slide are forward-looking statements that are based on assumptions and subject to significant business, economic, regulatory and competitive uncertainties and contingencies, many of which are beyond the control of LifeStance and its management, and are based upon assumptions with respect to future decisions and conditions, which are subject to change. Actual results will vary and those variations may be material. For a discussion of some of the important factors that could cause these variations, please see slide 2. Nothing in this presentation should be regarded as a representation by any person that these targets will be achieved or that these targets are a reliable prediction of future events. LifeStance undertakes no duty to update its targets

2. As a percent of total revenue

Investment Highlights ⁽¹⁾

1

Reimagining Mental Health Access, Affordability and Outcomes

370 centers

3,301 clinicians ⁽²⁾

2.3 million patient visits

81% decrease in suicidal ideation ⁽³⁾

2

Disruptive Tech-Enabled Care Delivery Model

80 patient Net Promoter Score ⁽⁴⁾

80% patients using digital engagement tools

3

Delivering Powerful Incentives for All Key Stakeholders

87% clinician retention rate

200+ national payor partnerships

2,100+ primary care physician partnerships

4

Multiple Growth Vectors to Capture Massive Market Opportunity

\$116 billion total addressable market

41% organic revenue growth in 2020 ⁽⁵⁾

5

Strong Momentum with Robust Unit Economics and Growing Profitability

94% revenue CAGR

32% 2020 Center Margin ⁽⁶⁾

179% Adjusted EBITDA CAGR ⁽⁷⁾

6

Experienced Leadership with Track Record of Success

21 years average experience among leadership team

5 prior healthcare businesses successfully founded and exited

Notes:

1. Data presented for 2020 unless otherwise stated

2. Number of clinicians as of March 31, 2021

3. Reported after two visits to treat the condition

4. "Net Promoter Score" refers to a measure of patient satisfaction widely used in the behavioral health care industry, calculated based on responses to patient surveys administered following a patient's appointment from January 14, 2021 through March 31, 2021

5. Organic revenue growth defined as the change in total revenue, excluding revenue from acquisitions for the first twelve months following the date of acquisition of new centers. Calculated based on pro forma revenue for the year ended December 31, 2020, giving pro forma effect to the TPG Acquisition

6. Center Margin defined as income (loss) from operations excluding depreciation and amortization and general and administrative expenses. Reconciliation of Center Margin to its closest GAAP measure is provided in the appendix hereto

7. Adjusted EBITDA defined as net income (loss) excluding interest expense, depreciation and amortization, provision (benefit) for income taxes, gain (loss) on remeasurement of contingent consideration, unit-based compensation, management fees, loss on disposal of assets, transaction costs and other expenses. Reconciliation of Adjusted EBITDA to its closest GAAP measure is provided in the appendix hereto

Appendix

Competitive Landscape



Positioned to transform mental health care for all stakeholders

Independent Practice

95% of all mental health clinicians

Outpatient Center-Based

Location-based providers of higher acuity psychiatric and psychotherapy services

Telehealth

Virtual-only delivery of a wide range of mental health care services

Employer-Focused

Employer-focused providers of therapy and wellness services through virtual delivery

	LifeStance HEALTH	Independent Practice	Outpatient Center-Based	Telehealth	Employer-Focused
Hybrid Delivery Model	✓	✗	✗	✗	✗
Comprehensive Clinical Services	✓	✗	✗	✓	✗
100% In-Network Insurance ⁽¹⁾	✓	✗	✗	✗	✗
National Scale	✓	✗	✗	✓	✓
Digital Tools	✓	✗	✗	✓	✓
W-2 Clinician Employment	✓	✗	✓	✗	✗
Integrated with Medical Care	✓	✗	✗	✗	✗

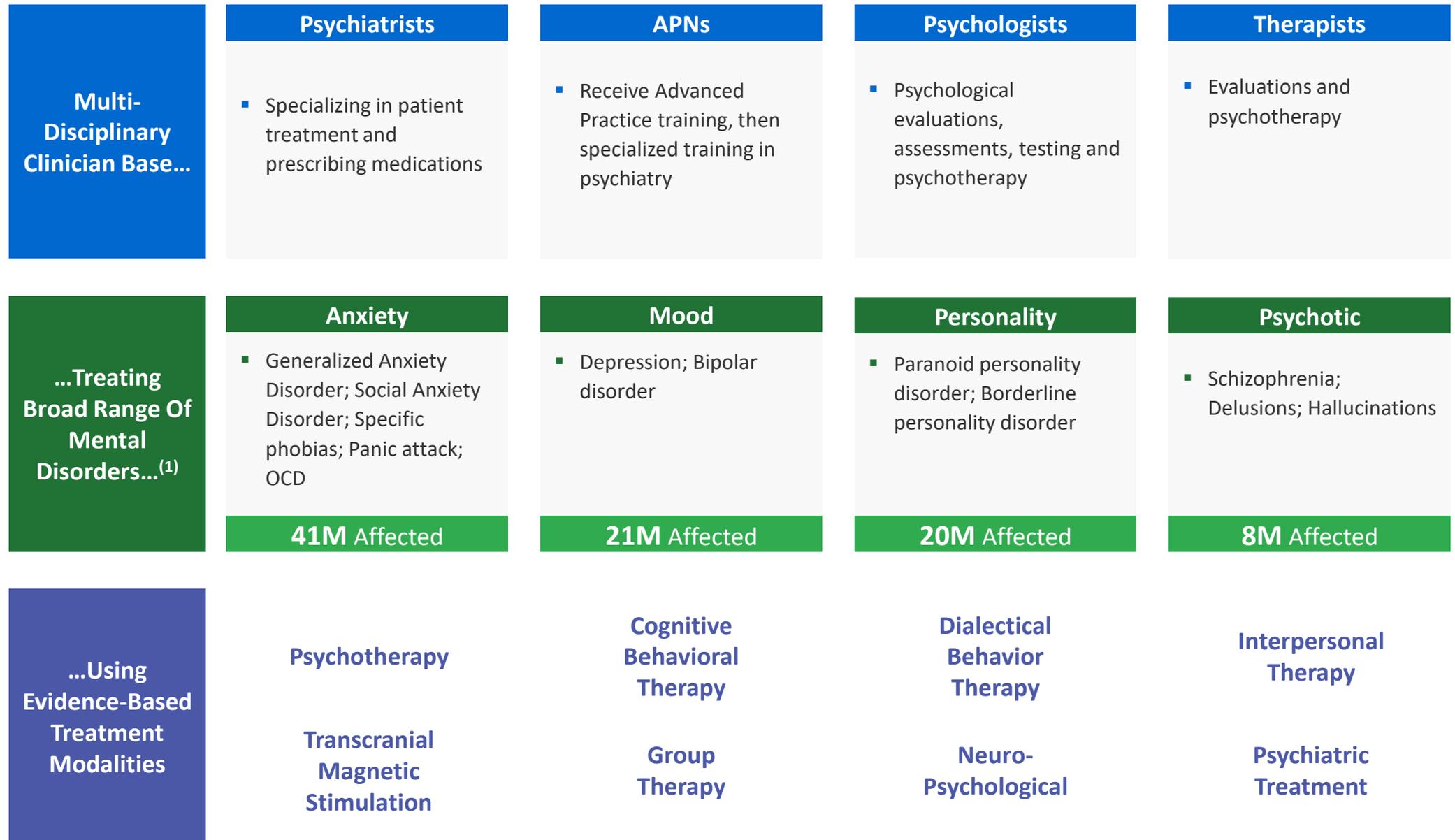
Our Clinical Care Model



- We are the **front-door to mental health care** offering comprehensive clinical care

- Treating conditions **across the clinical spectrum**

- Outcomes tracked and shared with clinicians to monitor patient's progress



Definitions

- **Centers** - locations open for business and attending to patients
- **Clinicians** - psychiatrists, APNs, psychologists and therapists who are actively seeing patients and employed
- **Visits** - in-person and virtual sessions between a patient and a clinician
- **Revenue** - in exchange for all patient activities. We bill each patient or third-party payor on a fee-for-service basis as medical services are rendered. Revenue is recognized as performance obligations are satisfied
- **Organic Revenue Growth** - change in total revenue, excluding revenue from acquisitions for the first twelve months following the date of acquisition of new centers
- **Center Margin** - income (loss) from operations excluding depreciation and amortization and general and administrative expenses
- **Adjusted EBITDA** - net income (loss) excluding interest expense, depreciation and amortization, provision (benefit) for income taxes, gain (loss) on remeasurement of contingent consideration, unit-based compensation, management fees, loss on disposal of assets, transaction costs and other expenses
- **Adjusted EBITDA Margin** - adjusted EBITDA divided by total revenue

GAAP to Non-GAAP Reconciliations

Center Margin

	Successor	Predecessor	Pro Forma	Successor	Predecessor		
	Three months ended March 31, 2021	Three months ended March 31, 2020	Year ended December 31, 2020	April 13 to December 31, 2020	January 1 to May 14, 2020	Year ended December 31, 2019	Year ended December 31, 2018
<i>(in thousands)</i>							
Income (loss) from operations	\$ (881)	\$ 5,635	\$ 315,304	\$ 6,741	\$ 8,695	\$ 15,241	\$ 2,787
Adjusted for:							
Depreciation and amortization	12,228	2,175	42,949	27,710	3,335	6,095	2,733
General and administrative expenses ⁽¹⁾	32,651	13,662	391,531	51,841	20,854	41,060	24,468
Center Margin	\$ 43,998	\$ 21,472	\$ 119,176	\$ 86,292	\$ 32,884	\$ 62,396	\$ 29,988

Adjusted EBITDA

	Successor	Predecessor	Pro Forma	Successor	Predecessor		
	Three months ended March 31, 2021	Three months ended March 31, 2020	Year ended December 31, 2020	April 13 to December 31, 2020	January 1 to May 14, 2020	Year ended December 31, 2019	Year ended December 31, 2018
<i>(in thousands)</i>							
Net income (loss)	\$ (8,682)	\$ 2,653	\$ (270,909)	\$ (13,125)	\$ (24,945)	\$ 5,669	\$ (1,097)
Adjusted for:							
Interest expense	8,632	1,680	12,538	19,112	3,020	5,409	453
Depreciation and amortization	12,228	2,175	42,949	27,710	3,335	6,095	2,733
Income tax (benefit) provision	(2,761)	703	(95,861)	(4,022)	(2,139)	2,206	5,385
(Loss) gain on remeasurement of contingent consideration	307	(354)	254	576	(322)	(299)	(2,488)
Unit-based compensation	605	-	318,063	1,452	-	54	249
Management fees ⁽²⁾	89	-	1,369	142	14	-	-
Loss on disposal of assets	-	-	121	121	-	-	-
Transaction costs ⁽³⁾	1,534	953	39,409	3,937	33,247	2,186	533
Other expenses ⁽⁴⁾	632	407	2,202	1,567	635	3,010	695
Adjusted EBITDA	\$ 12,584	\$ 8,217	\$ 50,135	\$ 37,470	\$ 12,665	\$ 24,400	\$ 6,463

Notes:

1. Represents salaries, wages and employee benefits for our executive leadership, finance, human resources, marketing, billing and credentialing support and technology infrastructure

2. Represents management fees paid to certain of our executive officers and affiliates of our Principal Stockholders pursuant to the management services agreement entered into in connection with the TPG Acquisition

3. Primarily includes capital markets advisory, consulting, accounting and legal expenses related to our acquisitions and costs related to the TPG Acquisition. Of the transaction costs incurred in 2019, \$1.4 million relate to the TPG Acquisition. Of the transaction costs incurred in 2020 on a pro forma basis, \$32.8 million relate to the TPG Acquisition

4. Primarily includes costs incurred to consummate or integrate acquired centers, certain of which are wholly owned and certain of which are affiliated practices, in addition to the compensation paid to former owners of acquired centers and related expenses that are not reflective of the ongoing operating expenses of our centers. Acquired center integration, former owner fees, and other are components of general and administrative expenses included in our consolidated statement of income (loss). Impairment on loans is a component of center costs, excluding depreciation and amortization included in our consolidated statement of income (loss)