Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

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

EMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
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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* Pantaleoni Pablo					2. Issuer Name and Ticker or Trading Symbol LifeStance Health Group, Inc. [LFST]									all app Direc			10% O	ner	
(Last)	(Fii ESTANCE	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/12/2024								X	below	er (give title		Other (below) Officer	specity	
C/O LIFESTANCE HEALTH GROUP, INC. 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) X Form filed by One Reporting Person					.			
(Street) SCOTTS	SDALE AZ	Z 8	35251										X		filed by Mo		orting Pers an One Rep		
(City)	(St	(State) (Zip) 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.												nded to					
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	or B	enefic	ially	Own	ed			
Date		2. Transac Date (Month/Da	Execu ay/Year) if any		A. Deemed tecution Date, any lonth/Day/Year)		Transaction		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) c (D)	Price	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 03/12			03/12/2	2024	s ⁽¹⁾ 43,304 D \$6.76 1,310		10,043		D										
		Tai								•	osed of, o			•	Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)	instr.	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		te ear)	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

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.

By: /s/ Ryan Pardo, Attorney-

in-Fact

** Signature of Reporting Person Date

03/14/2024

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.