FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OMB APPROVAL

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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 Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(c). Se	ee Instruction 1	0.																		
1. Name ar	2. Issuer Name and Ticker or Trading Symbol LifeStance Health Group, Inc. [LFST]							(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)											
<u>DeLuca Teresa</u>						[3.51								Direct	ctor		10% Ov	vner		
(Last)	3. Date of Earliest Transaction (Month/Day/Year) 08/14/2024							_	Offic belov	er (give title w)		Other (s below)	specify							
	1																			
4800 N.	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street)					1										Form filed by One Reporting Person					
SCOTTSDALE AZ 85251														`	Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Ž	Zip)	-		Person														
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Bene	ficia	lly Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Executio			cution Date,		Transaction D		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Secur Benef	cially d Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A)) or)	Price	Transa	action(s) 3 and 4)			(111511. 4)	
Common Stock 08/14/2									A		35,211(1)	1) A \$		\$0.0	0 71,574			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)	vative Conversion Date Execution Da urity or Exercise (Month/Day/Year) if any		ion Date,	4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y C	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	or Num of	nber						

Explanation of Responses:

1. Includes 35,211 restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's common stock

<u>By: /s/ Ryan Pardo, Attorney-in-Fact</u>

08/30/2024

** 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.