FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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).

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* Wiadrowski David						2. Issuer Name and Ticker or Trading Symbol Life360, Inc. [NONE]									ck all app	,	ng Pers	son(s) to Is	
(Last)	(Fi	rst) (M	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/29/2024							Office below	er (give title		Other (s below)	specify		
C/O LIFE360, INC. 1900 SOUTH NORFOLK STREET, SUITE 310					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable Line) $\frac{X}{} \text{Form filed by One Reporting Person}$					
(Street) SAN MA	(Street) SAN MATEO CA 94403													Form filed by More than One Reporting Person					
(City)	(St		Zip)	- Davis	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Intive Securities Acquired, Disposed of, or Benefit									Instructi	on 10.		ten plan	that is inter	nded to
		Table	I - Nor	n-Deriva	itive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ticiali	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Executive (Executive (Deemed cution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securit Disposed 5)		es Acquired (A) o Of (D) (Instr. 3, 4		A) or 3, 4 and	5. Amo Securit Benefic Owned Reporte	ies ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or I	Price	Transa	ction(s) 3 and 4)			(111341. 4)	
Common stock 05/29/2					2024				A		6,303(1)	A	\	\$0	49,524(2)		:	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 urity or Exercise (Month/Day/Year) Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Represents the grant of Restricted Stock Units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's common stock upon settlement. 1/4th of the RSUs will vest quarterly from May 15, 2024, subject to the Reporting Person's continuous service through each vest date.
- 2. Includes 8,860 RSUs, each of which represents a contingent right to receive one share of the Issuer's common stock upon vesting.

Remarks:

/s/ Jay Sood, as Attorney-in-

05/31/2024

Fact

** 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.