FORM 4

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

STATEMENT (	OF CHANG	ES IN BENEF	FICIAL OWNE	RSHIP
-------------	----------	-------------	-------------	-------

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	urden								
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

1. Name and Address of Reporting Person*  Bradley Julie MB				- 3. E	2. Issuer Name and Ticker or Trading Symbol ContextLogic Inc. [ WISH ]  3. Date of Earliest Transaction (Month/Day/Year)									k all applic Directo	etor er (give title		son(s) to Iss 10% Ov Other (s below)	vner	
(Last) (First) (Middle) ONE SANSOME STREET, 33RD FLOOR				04/15/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street) SAN FRANCI	SCO CA	<b>A</b> 9	94104		-						(			ine) X	Form f	led by One	e Repo	orting Person	n
(City)	(S	tate) (	(Zip)		Ru	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.								d to					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		Code	Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 a			5. Amou Securitie Benefici Owned F Reported	es ally following	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)		e:e	Transact (Instr. 3	ion(s)			(III3ti. 4)	
Class A Common Stock 04/15/				5/2023	2023 M <sup>(1)</sup> 4,833 A \$0.00		0.00	7,5	7,516(2)		D								
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative   Conversion   Date   Execution Date,   Security   or Exercise   (Month/Day/Year)   if any   Conversion   Con			Transaction Code (Instr.		ı of E		s. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S (I	. Price of eerivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisat		xpiration ate	Title	Amou or Numb of Share	er					
Restricted Stock Unit	\$0.00	04/15/2023			M			4,833	(3)(4)		(3)	Class A Common Stock	4,83	3	\$0.00	0		D	

## **Explanation of Responses:**

- 1. The Reporting Person received Restricted Stock Units ("RSUs") which represent a contingent right to receive one share of Class A Common Stock for each RSU. This reported transaction represents the settlement of RSUs vested as of April 15, 2023.
- 2. Reflects shares adjusted to give effect to a 1-for-30 reverse stock split which was effective April 12, 2023.
- 3. Subject to the Reporting Person's continuous service, the RSUs will vest in full on the earlier of the one-year anniversary of the date of grant or on the date of the regular annual meeting of the Issuer's stockholders following the date of grant.
- 4. This reported transaction represents the settlement of RSUs vested as of April 15, 2023.

## Remarks:

/s/ Marianne Lewis, Attorney-

04/18/2023

in-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.