SEC Form 4	ł
------------	---

[]

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

I

OMB Number:	3235-0287
Estimated average burd	len
hours per response:	0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			or Sec	tion 30(n) of the inv	estment Corr	pany Act of 1940							
1. Name and Address of Reporting Person [*] Bradley Julie MB				2. Issuer Name and Ticker or Trading Symbol <u>ContextLogic Inc.</u> [WISH]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First) (Middle)		3. Date 04/10/	of Earliest Transac 2023	tion (Month/D	ay/Year)		Officer (give title below)	Other below)	(specify)			
ONE SANSOME STREET, 33RD FLOOR			4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Ap Line)									
(Street)							X	Form filed by One	e Reporting Pers	on			
SAN CA 94104						Form filed by More than One Reporting Person							
			Rule	 Rule 10b5-1(c) Transaction Indication 									
(City)	(State) (Zip) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							d to satisfy					
		Table I - Nor	n-Derivative S	ecurities Acqu	uired, Disp	osed of, or Benefi	cially (Dwned					
1. Title of Security	(Instr. 3)		2. Transaction	2A. Deemed	3.	4. Securities Acquired (A)	or	5. Amount of	6. Ownership	7. Nature of			

I. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	 Reported Transaction(s) (Instr. 3 and 4) 	(Instr. 4)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

L															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		Derivative		e Expiration Date s (Month/Day/Year) (A) sed str.		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	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	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Unit	(1)	04/10/2023		Α		357,142		(1)	(1)	Class A Common Stock	357,142	\$0.00	357,142	D	

Explanation of Responses:

1. The Reporting Person was granted restricted stock units ("RSUs") which represent a contingent right to receive one share of Issuer's Class A Common Stock for each RSU. The RSUs were granted in connection with the Reporting Person's service as a member of the Board of Directors of the Issuer. 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.

Remarks:

/s/ Marianne Lewis, Attorney-04/11/2023

Date

<u>in-Fact</u>

** Signature of Reporting Person

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.