FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	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*     Jain Tarun Kumar						2. Issuer Name <b>and</b> Ticker or Trading Symbol  ContextLogic Inc. [ WISH ]									(Che	ck all applic Directo	able)			Ssuer Owner r (specify	
(Last) (First) (Middle) ONE SANSOME STREET, 40TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 11/15/2021									_ X	below)	Chief Pro	duct (	below)		
(Street) SAN FRANCISCO CA 94104					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transar Date (Month/December 2)					Execution Date,			Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				5. Amour Securitie Beneficia Owned F Reported	s illy ollowing	Form (D) or	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	,	Amount	(A (D	or	Price	Transaction(s) (Instr. 3 and 4)				(111301.4)		
Class A Common Stock 11/15/				/2021				М		184,42	20	A	\$0.00	184,420			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/)	Co	nsactio	str.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea				7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Co	de V	, ]	(A)	(D)	Da Ex	ite ercisable		xpiration ate	Title	OI N	mount r umber f Shares		(Instr. 4)				
Restricted Stock Unit	(1)	11/15/2021		N	1		184,420			(2)(3)		(2)(3)	Class A Commo Stock		84,420	\$0.00	1,290,941		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.
- 2. Subject to the reporting person's continuous service, 6.25% of the RSUs will vest on a quarterly basis beginning on August 15, 2021 (with all quarterly vesting events occurring on a "Company Vesting Date" of February 15, May 15, August 15, or November 15). Vested RSUs will settle on or following the vesting date, but in any event within 60 days following the vesting date (unless the Reporting Person and the Company have agreed in writing to a later settlement date pursuant to procedures the Company may prescribe at its discretion).
- $3. \ This \ reported \ transaction \ represents \ the \ settlement \ of \ RSUs \ vested \ as \ of \ August \ 15, \ 2021 \ and \ November \ 15, \ 2021.$

## Remarks:

/s/ Renee Jackson, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person

Date

11/17/2021

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.