SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

		Washington, D.C. 20549												OMB APPROVAL					
Section 16. Form 4 or Form 5 obligations may continue. See							T OF CHANGES IN BENEFICIAL OWNERSHIP										OMB Number: 3235-028 Estimated average burden hours per response: 0.		
transac contrac the pur securiti to satis	chase or sale of es of the issue fy the affirmativ ons of Rule 10b	pursuant to a written plan for f equity that is intended re defense																	
1. Name and Address of Reporting Person* PARISI RICHARD S						2. Issuer Name and Ticker or Trading Symbol <u>ContextLogic Inc.</u> [LOGC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 2648 IN							3. Date of Earliest Transaction (Month/Day/Year) 01/15/2025								Image: Director 10% Owner Officer (give title below) Other (specify below)				
(Street) OAKLAND CA 94601					= 4. -	Line)										nt/Group Filing (Check Applicable d by One Reporting Person d by More than One Reporting			
(City) (State) (Zip)																			
1 Title of 9	Socurity (Inst		le I - Nor	2. Trans			2A. Deemo		quired, D	<u> </u>		f, or Be		ly Owned		6.04	/nership	7. Nature	
1. Title of Security (Instr. 3)				Date (Month/E		ear)	Execution Date, if any (Month/Day/Year		Transacti Code (Ins	ion 🛛	Disposed 5)	I Of (D) (Ins	tr. 3, 4 and	Securitie Beneficia Owned F	ally ollowing	Form (D) of	n: Direct or Indirect nstr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
									Code V	/	Amount	(A) oi (D)	Price	Price Reported Transactior (Instr. 3 and				ilisu. 4)	
		٦							uired, Dis , options					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exer Expiration D (Month/Day/	Date	of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares						
Restricted Stock Unit	(1)	01/15/2025			Α		45,360		(2)		(2)	Class A Common Stock	45,360	\$0	45,36	50	D		
Explanatio	n of Respons	es:					1		L									1	

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. The RSUs were granted in connection with the Reporting Person's service as a member of the Board of Directors for the Issuer. Subject to the Reporting Person's continued service, the RSUs will vest in full on the one-year anniversary of the date of grant based upon continued service, or on a pro-rata basis upon termination of service, including resignation before vesting. Upon termination of service, the Board in its discretion may fully vest the Reporting Person's RSUs. RSUs will fully vest in connection with the occurrence of a change in control or any other transaction the Board designates as a "special transaction". Vested RSUs will settle on or following the vesting date, but in any vent within 60 days following the vesting date (unless the Reporting Person and the Issuer may prescribe at its discretion).

> /s/ Marianne Lewis, Attorney-01/17/2025

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.