SEC Form 4 FORM 4 U	INITED	STATES					SE CO	OMMIS	SION						
			wasning	lon, D.C.	2054	9			OMB APPROVAL						
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STAT	Filed pure	suant to Section 16(a)	HANGES IN BENEFICIAL OWNERSHIP OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 Section 16(a) of the Securities Exchange Act of 1934 80(h) of the Investment Company Act of 1940 OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 me and Ticker or Trading Symbol <u>Therapeutics Inc.</u> [CNTX] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) ment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable											
1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol <u>Context Therapeutics Inc.</u> [CNTX]						(Check all applicable)						
	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/31/2023												
2001 MARKET STREET SUITE 3915, UNIT #15	4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) PHILADELPHIA PA 19103			Form filed by More than One Reporting Person								orting				
			Rule 10b5-1(c) Transaction Indication												
(City) (State) (2	Zip)		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.												
Table	e I - Non	-Derivative	e Securities Acq	uired,	Disp	osed of, o	r Ben	eficially	Owned						
Da		2. Transaction Date (Month/Day/Ye	Execution Date,	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)				

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	Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8) Si (Month/Day/Year) 0 (Month/Day/Year) 0 (Mon		of Derivati Securiti Acquire (A) or Dispose of (D)	of Expiration Date Derivative (Month/Day/Year) Securities Acquired A) or Disposed of (D) Instr. 3, 4				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$0.87	05/31/2023		A		25,000		(1)	05/30/2033	Common Stock	25,000	\$0	25,000	D	

Explanation of Responses:

1. The option vests and becomes exercisable on the earlier of (i) May 31, 2024 (the one-year anniversary of the date of grant) or (ii) the Issuer's 2024 annual meeting of stockholders, subject to continued service with the Issuer.

Remarks:

/s/ Alex Levit, Attorney-in-Fact 05/31/2023

** 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.