Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

gton, D.C. 20549	OMB APPROVAL			
S IN RENEFICIAL OWNERSHIP	OMB Number:	3235		

STATEMENT	OF	CHANGES	IN	BENE	ΞF

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OIVIB APPE	ROVAL						
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

1. Name and Address of Reporting Person* Minai-Azary Jennifer Lynn					2. Issuer Name and Ticker or Trading Symbol Context Therapeutics Inc. [CNTX]								(Che	ck all app	,	ng Pei	rson(s) to Is 10% O Other (wner	
(Last) (First) (Middle) 2001 MARKET STREET SUITE 3915, UNIT #15						3. Date of Earliest Transaction (Month/Day/Year) 12/16/2022								X	belov	below) Chief Financial		below)	opeon,
(Street) PHILAD (City)	DELPHIA PA 19103 (State) (Zip) 4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person										
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3enet	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquidisposed Of (D) (I						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
						Code	v	Amount	(A) or (D)		rice	Transa	ransaction(s)			(msu. 4)			
Common Stock 12/16/				12/16/	2022				P		25,000	A	4 3	\$0.74	40	0,000		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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		4. Transa Code (8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share		int er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Benefical Ownership (Instr. 4)			

Explanation of Responses:

Remarks:

/s/ Alex C. Levit, Attorney-in-12/19/2022

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.