FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, I | D.C. 20549 |
|---------------|------------|
|---------------|------------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

| OMB APPROVAL             |  |  |  |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287    |  |  |  |  |  |  |  |  |  |  |
| Estimated average burden |  |  |  |  |  |  |  |  |  |  |
| hours per response.      |  |  |  |  |  |  |  |  |  |  |

|   | tion 1(b).  | 140. 000                                   |   | Filed  | l pursua<br>or Se   | ant to S<br>ection 3                                     | Section<br>30(h) c                                 | n 16(a)<br>of the Ir  | of the S<br>ovestme | ecuriti<br>nt Cor  | ies Exchang<br>mpany Act o             | e Act of<br>f 1940   | 1934   |   | nour   | s per re  | esponse:   | 0.5                                |
|---|---|--|---|--|---|--|--|---|---------------------|--|--|--|--|---|--|---|--|------------------------------------|
| Name and Address of Reporting Person*     Sahmoud Tarek         |   |  |   | 2. Issuer Name and Ticker or Trading Symbol Context Therapeutics Inc. [ CNTX ] |   |  |  |   |                     |  |  |  | Check all a<br>Dir                             | nip of Reporti<br>oplicable)<br>ector<br>cer (give title  | Ü  | 10% O   | wner   |                                    |
| (Last) (First) (Middle) 2001 MARKET STREET SUITE 3915, UNIT #15 |   |  |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 08/16/2022 |  |  |   |                     |  |  |  |  | X Officer (give title Other (specify below)  Chief Medical Officer  |  |   |  |                                    |
| (Street) PHILADELPHIA PA 19103 (City) (State) (Zip)             |   |  |   |  |   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |   |                     |  |  |  |  | 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 \$   | Secu   | rities   | Acq   | uired,              | Dis  | posed of                               | , or Be  | nefic  | ially Ow  | ned  |   |  |                                    |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)   |   |  |   | Exec<br>ay/Year) if an   |   | Deemed<br>ecution Date,<br>ny<br>onth/Day/Year)          |  | 3.<br>Transaction<br>Code (Instr. 8)  4. Securitie<br>Disposed 6 5) |                     | es Acquired (A<br>Of (D) (Instr. 3,                            |  | and Secu<br>Bene<br>Own  | nount of<br>rities<br>ficially<br>ed Following | Fori  | Ownership<br>m: Direct<br>or Indirect<br>Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |                                    |
|   |   |  |   |  |   |  |  |   | Code                | v  | Amount                                 | (A) or<br>(D)  | Price  | Tran  | Reported<br>Transaction(s)<br>(Instr. 3 and 4)     |   |  | (Instr. 4)                         |
| Common Stock 08/16/2  |   |  |   | 2022   |   |  | P  |   | 10,000              | A  | \$1.                                   | 95 10,000  |  |   | D  |   |  |                                    |
|   |   | Tal  |   |  |   |  |  |   |                     |  | osed of, convertib                     |  |  |   | ed   |   |  |                                    |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)             | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |  | 4.<br>Transaction<br>Code (Instr.<br>8)                     |  | of<br>Deriv<br>Secu<br>Acqu<br>(A) o<br>Disport (D | r<br>osed<br>)<br>r. 3, 4   | Expirati            | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |  | 8. Price of Derivative Security (Instr. 5)  |  | ly  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficia<br>Ownersh<br>(Instr. 4) |
|   |   |  | Code  | v  | (A)   | (D)  | Date<br>Exercis                                    | able  | Expiration<br>Date  |  | Amount<br>or<br>Number<br>of<br>Shares |  |  |   |  |   |  |                                    |

**Explanation of Responses:** 

Remarks:

/s/ Alex Levit, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person Date

08/17/2022

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.