## SEC Form 5

FORM 5	UNITED STATES SECURITIES AND EXCHANGE COMMISSION
	Washington, D.C. 20549

OMB APPROVAL

l	OMB Number:	3235-0362
	Estimated average bur	den
	hours per response:	1.0

Form 3 Holdings Reported.

Instruction 1(b)

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP** 

Form 4 Transact	ions Reported.	Filed	l pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940				
1. Name and Addres Krasner Alan	ss of Reporting Perso <u>Seth</u>	on*	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Crinetics Pharmaceuticals, Inc.</u> [ CRNX ]		ationship of Reporting Pe < all applicable) Director Officer (give title	rson(s) to Issuer 10% Owner Other (specify	
	(First) S PHARMACEU 5 CANYON ROA		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2018		below) Chief Medical	below) Officer	
10222 BARNES CANYON ROAD, BLDG. #2       (Street)       SAN DIEGO     CA     92121       (City)     (State)     (Zip)		92121	4. If Amendment, Date of Original Filed (Month/Day/Year)	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>			
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## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned at end of	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership
		(month/bay)real)	5)	Amount	(A) or (D)	Price	Issuer's Fiscal Year (Instr. 3 and 4)	Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	11/20/2018		<b>J</b> <sup>(1)</sup>	1,470	A	\$14.45	3,470	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Nur of Derive Secur Acqui (A) or Dispo of (D) (Instr. and 5	ative rities ired osed . 3, 4	Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Shares purchased under Crinetics Pharmaceuticals, Inc. 2018 Employee Stock Purchase Plan in a transaction exempt from Section 16(b) pursuant to Rule 16b-3(c).

**Remarks:** 

/s/ Marc Wilson as attorney-in-02/12/2019 <u>fact</u>

\*\* 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.