FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287					
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Filed 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 Address of Reporting Person <sup>*</sup> Krasner Alan Seth			2. Issuer Name <b>and</b> Ticker or Trading Symbol Crinetics Pharmaceuticals, Inc. [ CRNX ]		ationship of Reporting Pe (all applicable) Director	10% Owner			
(Last) C/O CRINETIC	(Last) (First) (Middle) C/O CRINETICS PHARMACEUTICALS, INC.		3. Date of Earliest Transaction (Month/Day/Year) 10/17/2023	X	Officer (give title below) Chief Medical	Other (specify below) Officer			
10222 BARNES CANYON ROAD, BLDG 2			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applical Line)					
(Street) SAN DIEGO	CA	92121		X	Form filed by One Rep Form filed by More the Person	÷			
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication						
			X Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						

## 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. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 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)
Common Stock	10/17/2023		М		7,000	Α	\$12.01	50,210 <sup>(1)</sup>	D	
Common Stock	10/17/2023		S		7,000	D	\$ <mark>30</mark>	43,210	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deri Seci Acq (A) o Disp of (E	oosed D) tr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- qualified stock option (Right to Buy)	\$12.01	10/17/2023		М			7,000	(2)	06/15/2028	Common Stock	7,000	\$0.00	153,473	D	

Explanation of Responses:

1. Includes 909 shares acquired under the Issuer's Employee Stock Purchase Plan since the last Section 16 filing by the Reporting Person.

2. 25% of the shares subject to the option vest on June 16, 2019, and 1/48th of the shares subject to the option vest monthly thereafter, subject to the Reporting Person's continued employment with the Issuer on each such vesting date. The stock options are also subject to accelerated vesting as set forth in the employment agreement between the Issuer and the Reporting Person.

Remarks:

/s/ Marc Wilson, as attorney-	10/10/2022
in-fact	<u>10/19/2023</u>

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.