FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinatan | D C | 20540 |
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| Washington, | D.C. | 20549 |

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OWNERSHIP

| wasnington, D.C. 20549 | |
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| OMB APPR | OVAL |
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| OMB Number: | 3235-0362 |
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| hours per response: | 1.0 |

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Check this box if no longer subject to

| Form 3 | Holaings Repo | rtea. | | | | | | | | | | | | | | | |
|---|---|--|---|---|--|---|---------------|--|--------------------------|-----------------------------|--|------------------------|--|---|--------------------------------------|---|--|
| Form 4 | Transactions R | eported. | File | ed pursuant to or Section | | | | | ities Excha ompany Ad | | | | | | | | |
| Name and Address of Reporting Person* Wilson Marc | | | | 2. Issuer Name and Ticker or Trading Symbol Crinetics Pharmaceuticals, Inc. [CRNX] | | | | | | | | (Check | lationship of Report ck all applicable) Director | | 10% C | | Owner |
| (Last) C/O CRII 10222 B/ | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019 | | | | | | | X Officer (give title Other (specify below) CFO and Secretary | | | | | | | | | |
| (Street) | 4. If Amen | dment | , Date (| of Orig | inal File | d (Month/I | Oay/Yea | | 6. Indiv _ine) X | Form | r Joint/Gro n filed by O n filed by M on | ne Re | porting Pe | rson | | | |
| (City) | (Sta | | Zip) | vative Sec | uritic | | auire | ad Die | hasons | of or | Renefic | ially (| Owne | | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. | | | | | | sed 5. Amo Securir Benefic | | ount of 6 ties C cially F | | ership n: Direct | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Amount | | (A) or (D) | Price | Is Y | Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | | (D) or Indirect (I) (Instr. 4) | | (Instr. 4) |
| Common Stock | | | 05/20/2019 | J (1) | | .) | 1, | 471 | A \$14. | | 5 | 58,792 ⁽²⁾ | | D | | | |
| | | Та | ble II - Derivat (e.g., p | ive Secur uts, calls, | | | | | | | | | vned | | | | |
| 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. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5 | rities iired r osed) : 3, 4 | Expir | ate Exercisable and ration Date nth/Day/Year) | | Amo Secu Undo Deri | tle and unt of urities erlying vative urity (Instr. 3 4) | Deriv Secu (Inst | B. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | O Fo | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | (A) | (D) | Date Exerc | cisable | Expiration Date | n Title | Number of | | | | | | |

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).
- 2. Includes 29,090 shares of restricted stock which remain subject to continued vesting.

Remarks:

/s/ Marc Wilson

02/11/2020

** 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.