SEC For	rm 5																	
	FORM	5 U	NITED STA	TES SEC						ANC	SE COM	MIS	SSIO	N				
Check		Washington, D.C. 20549											OMB APPROVAL					
to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				STATEMENT OF CHANGES IN BENEFIC									L		OMB Number: 3235-0362 Estimated average burden			35-0362
Form 3 Holdings Reported.					OWNERSHIP									hours per response:				1.0
Form 4	4 Transactions	Reported.	Filed	d pursuant to S or Section 3	Section 30(h)	n 16(a) of the I) of the nvestm	e Securit nent Co	ties Exchanger	ange / ct of 1	Act of 1934 940							
1. Name and Address of Reporting Person* <u>Knight Jeff E.</u>				2. Issuer Name and Ticker or Trading Symbol Crinetics Pharmaceuticals, Inc. [CRNX]									all app Direc	licable) tor	,		to Issu % Own er (spe	ier
(Last) (First) (Middle) C/O CRINETICS PHARMACEUTICALS, INC. 10222 BARNES CANYON ROAD, BLDG 2					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2022								below	/)	below) of Operating Officer			
(Street) SAN DIEGO CA 92121				4. If Amend	4. If Amendment, Date of Original Filed (Month/Day/Year)							 Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting 						
(City)										Perso	n							
		Table	e I - Non-Deriva	ative Secu	ritie	s Acc	quire	d, Dis	posed	of, c	or Benefic	ially	/ Own	ed				
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.		4. Securities Acquired Of (D) (Instr. 3, 4 and 5					5. Amount of Securities Beneficially Owned at end o		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership	
				(month/Day/re		5)		Amoun	Amount		or Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I)		(Instr. 4)	
Common Stock			11/20/2022		J ⁽¹⁾)	537		Α	\$15.16		5,487			D		
	*	Та	ble II - Derivat (e.g., pr	ive Securi uts, calls, v				•					Owne	d				
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)	of Derin Secu Acqu (A) o Disp of (D	osed)) r. 3, 4	Expira (Mont	te Exerc ration Da th/Day/Y		A S U D S 3	Title and mount of ecurities anderlying erivative ecurity (Instr. and 4) Amount or Number of Shares	Der Sec (Ins	8. Price of Derivative Security (Instr. 5) 9. Numt Security Benefic Owned Followin Reporte Transac (Instr. 4)		re es ally g	Ownership C Form: E Direct (D) (11. Nature of Indirect Beneficial Ownershij (Instr. 4)

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:

<u>/s/ Marc Wilson</u>
** Signature of Reporting Person

01/27/2023

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.