FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Wilson Marc							2. Issuer Name and Ticker or Trading Symbol Crinetics Pharmaceuticals, Inc. [CRNX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) C/O CRINETICS PHARMACEUTICALS, INC. 6055 LUSK BOULEVARD							3. Date of Earliest Transaction (Month/Day/Year) 09/26/2024								below) CFO					
(Street) SAN DIEGO CA 92121 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - No	n-Deri	vativ	e Se	curit	ies Ac	quired	, Dis	sposed o	f, or Be	neficial	ly Owned	ł					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						ar) E	A. Deemed xecution Date, any Month/Day/Year)				4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Benefic Owned	es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 09/26/2									М		25,000	Α	\$15.29	9 130	5,092		D			
Common Stock 09/26/2						2024			S ⁽¹⁾		25,000	D	\$51.11	2) 111,092			D			
		-	Table II -						,		osed of, convertil		,	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	4. Transacti Code (Ins 8)				6. Date Exercisable and 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)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares							
Stock option (Right to Buy)	\$15.29	09/26/2024			М			25,000	(3)		02/26/2031	Common Stock	25,000	\$0	89,00	0	D			

Explanation of Responses:

- 1. The sale reported in this Form 4 was effected automatically pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- 2. The common stock was sold by the reporting person in open market transactions on the transaction date, with a volume weighted average sales price of \$51.11 per share. The range of sales prices on the transaction date was \$50.28 to \$51.54 per share. Detailed information on the exact number of shares can be obtained from the issuer upon request.
- 3. 1/48th of the shares subject to the option vested on March 26, 2021, 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

Marc Wilson

09/30/2024

** 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.