SEC For	m 4																	
FORM 4 UNIT				ED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549												OMB APPROVAL		
Section 16. Form 4 or Form 5 obligations may continue. See						AT OF CHANGES IN BENEFICIAL OWNERSHIP d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										OMB Number: 3235-0287 Estimated average burden hours per response: 0.5		
1. Name and Address of Reporting Person* Bedrosian Camille L						2. Issuer Name and Ticker or Trading Symbol <u>Crinetics Pharmaceuticals, Inc.</u> [ CRNX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)   ✓ Director   10% Owner			
(Last) (First) (Middle)															Officer (give title Other (specify below) below)			
C/O CRINETICS PHARMACEUTICALS, INC. 6055 LUSK BOULEVARD					- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individ   Line) Image: Comparison of Comparis									vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting			
(Street) SAN DIEGO CA 92121						Rule 10b5-1(c) Transaction Indication												
(City)											d to							
		Tab	le I - Non	-Deri	vativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or Be	neficial	ly Owned				Í
1. Title of Security (Instr. 3) Date (Month/I						/ear) i	A. Deemed Execution Date, Fany Month/Day/Year		, Transaction D Code (Instr. 5		1 Disposed	I. Securities Acquired (A) ( Disposed Of (D) (Instr. 3, 4 5)		Beneficia Owned F	es ally ollowing	Form (D) o	Ownership orm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) c (D)	Price	Price Reported Transaction (Instr. 3 and				(Instr. 4)	
Common Stock 06/07				07/202	/2024		Α		3,400	0 A \$		9,400			D			
		•	Fable II - I (								osed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Dat	e	7. Title and Amo of Securities Underlying Derivative Secur (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)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$44.71	06/07/2024			A		12,500		(2)		06/07/2034	Common Stock	12,500	\$0	12,50	0	D	

## Explanation of Responses:

1. The transaction reported on this line involves the receipt of restricted stock units, which represent the right to receive shares of the Issuer's Common Stock, with 100% vesting on the earlier of the first anniversary of the grant date or (b) the next occurring annual meeting of the Issuer's stockholders, subject to the Reporting Person's continued service on the board of directors of the Issuer through such vesting date.

2. The stock option shall vest and become exercisable on the earlier of the first anniversary of the grant date or (b) the next occurring annual meeting of the Issuer's stockholders, subject to the Reporting Person's continued service on the board of directors of the Issuer through such vesting date.

Marc Wilson, as attorney-in-	06/11/2024
fact	06/11/2024
** 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.