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
-------------	------	-------

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

					- 01	0000	1011 00(11)	or tire	iiivootiiioi	11 001	прапу Асс	01 10 10							-
Name and Address of Reporting Person* <u>Pizzuti Dana</u>				2. Issuer Name and Ticker or Trading Symbol Crinetics Pharmaceuticals, Inc. [CRNX]								k all applic Directo	tionship of Reportir all applicable) Director		10% Ow	ner			
(Last)	`	,	(Middle)	C		3. Date of Earliest Transaction (Month/Day/Year) 03/04/2024								X	below)		nd De	Other (s below) ev Officer	pecity
C/O CRINETICS PHARMACEUTICALS, INC. 6055 LUSK BOULEVARD				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) SAN DIE	EGO C.	A	92121											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication						1								
					Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ins														
		Tab	le I - Nor	ı-Deriv	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	nefi	cially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Da		Date,	, Transaction Dispose Code (Instr. 5)		Disposed	ties Acquired (A) o d Of (D) (Instr. 3, 4 a				es Form ally (D) of Following (I) (Ir		n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)		ice	Reported Transaction(s) (Instr. 3 and 4)		ľ		(Instr. 4)
Common Stock 03/0				03/04	4/2024				Α		23,000	00 A \$0		0.00(1)	28,911			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)	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	nber						
Stock Option (right to	\$43.51	03/04/2024			A		87,000		(2)		03/03/2034	Common Stock	87,	000	\$0.00	87,000)	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 25% vesting annually beginning on March 15, 2025.
- 2. The stock option shall vest and become exercisable in a series of forty-eight (48) successive equal monthly installments measured from the vesting commencement date of March 4, 2024.

Remarks:

/s/ Marc Wilson, as attorney-in-03/06/2024 fact

** 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.