3Q2024 Earnings

November 12, 2024

Crinetics
Pharmaceuticals

Safe Harbor Statement

This presentation contains forward-looking statements. Crinetics Pharmaceuticals, Inc. ("Crinetics," the "company," "we," "us," or "our") cautions you that all statements other than statements of historical facts contained in this presentation are forward-looking statements. Such forward-looking statements include, but are not limited to, statements regarding: the potential for interim results to be consistent with final results, once available; the potential for any of our ongoing clinical trials to demonstrate safety or efficacy; the plans and timelines for the clinical development of atumelnant and paltusotine, including the therapeutic potential and clinical benefits or safety profile thereof; the potential benefits of paltusotine for carcinoid syndrome patients; the plans and timelines for the FDA response and the commercial launch of paltusotine if the NDA submission is approved; the expected timing of initiation of a Phase 3 program of paltusotine for carcinoid syndrome and FDA consultation; the expected timing of additional data and topline results from studies of atumelnant in CAH and Cushing's syndrome; the expected timing of announcing preclinical data for candidate on the NDC platform and the therapeutic potential thereof, and the ; the potential and expected timing for IND-enabling studies in four different development candidates to transition to clinical development; the potential benefits of our PTH antagonist TSH antagonist, SST3 agonist, SST5 agonist, oral GLP-1 nonpeptide and oral GIP nonpeptide and our partner's nonpeptide radiotheranostics and SST2 agonist in patients across multiple indications and the expected timing of the advancement of such programs; and the company's anticipated cash runway. In some cases, you can identify forward-looking statements by terms such as "may," "believe," "anticipate," "could," "should," "estimate," "expect," "intend," "plan," "project," "will," "contemplate," "predict," "continue," "forecast," "aspire," "lead to," "designed to," "goal," "aim," "potential," "target," or other similar terms or the negatives thereof.

These statements speak only as of the date of this presentation, involve known and unknown risks, uncertainties, assumptions, and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements, including, without limitation: topline and initial data that we report may change following a more comprehensive review of the data related to the clinical studies and such data may not accurately reflect the complete results of a clinical study, and the FDA and other regulatory authorities may not agree with our interpretation of such results; the risk that interim results of a clinical trial do not necessarily predict final results and that one or more of the clinical outcomes may materially change as patient enrollment continues, following more comprehensive reviews of the data, and as more patient data become available; the possibility of unfavorable new clinical data and further analyses of existing clinical data; potential delays in the commencement, enrollment and completion of clinical trials and the reporting of data therefrom; the COVID-19 pandemic may disrupt our business and that of the third parties on which we depend, including delaying or otherwise disrupting our clinical trials and preclinical studies, manufacturing and supply chain, or impairing employee productivity; our dependence on third parties in connection with product manufacturing, research and preclinical and clinical testing; the success of our clinical trials and nonclinical studies; regulatory developments in the United States and foreign countries; unexpected adverse side effects or inadequate efficacy of our product candidates that may limit their development, regulatory approval and/or commercialization; our ability to obtain and maintain intellectual property protection for our product candidates; we may use our capital resources sooner than we expect; and other risks described under the heading "Risk Factors" in documents we file from time to time with the Securities and Exchange Commission. Because forward-looking statements are inherently subject to risks and uncertainties, some of which cannot be predicted or quantified and some of which are beyond our control, you should not rely on these forward-looking statements as predictions of future events. The events and circumstances reflected in our forward-looking statements may not be achieved or occur and actual results could differ materially from those projected in the forward-looking statements. All forward-looking statements are qualified in their entirety by this cautionary statement, which is made under the safe harbor provisions of the Private Securities Litigation Reform Act of 1995 and, except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise.

This presentation also contains estimates and other statistical data made by independent parties and by us relating to market size and growth and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates. In addition, projections, assumptions, and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk.

Progress on 2H2024 Goals and Milestones

Goal / Milestone	Timing	Progress
Initiation of IND enabling activities for SST3 candidate for ADPKD	3Q 2024	✓
NDA submission for paltusotine in acromegaly	3Q2024	✓
Raise capital to fund development of additional pipeline programs	4Q2024	✓
Nomination of TSH candidate for Graves' Disease / TED	4Q2024	✓
Initiation of Phase 3 activities for paltusotine in carcinoid syndrome	YE2024	•••
Additional data from Phase 2 study of atumelnant in CAH	Early 2025	•••
File IND for CRN09682 from novel NDC platform	Early 2025	•••

SST: somatostatin receptor type; ADPKD: Autosomal dominant polycystic kidney disease; NDA: New Drug Application; TSH: thyroid-stimulating hormone; TED: thyroid eye disease; IND: Investigational New Drug; NDCs: Nonpeptide Drug Conjugates; CAH: Congenital Adrenal Hyperplasia.

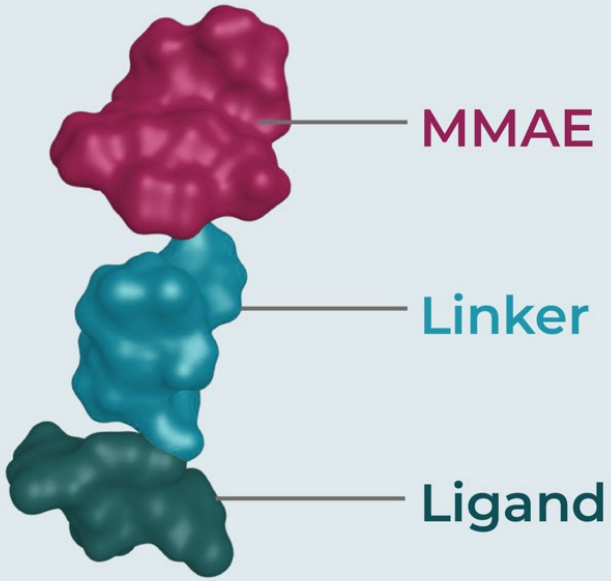
Deep Pipeline of Transformative Drug Candidates

Program	Discovery	IND-Enabling	Phase 1	Phase 2	Phase 3	Registrational	Anticipated Milestones
Paltusotine (SST2 agonist)	**Acromegaly (PATHFNDR-1 and -2)**						Acromegaly NDA Acceptance (December 2024)
	Carcinoid syndrome						Initiation of Phase 3 (4Q2024)
Atumelnant (ACTH antagonist)	**Congenital adrenal hyperplasia**						Additional Phase 2 Data (Early 2025) and Phase 3 Initiation (1H2025)
	Cushing's disease						Late-stage development (2025)
PTH antagonist	**Hyperparathyroidism**						IND (2025)
Nonpeptide drug conjugate (CRN09682)	**NETs** and SST2-expressing solid tumors						IND (Early 2025)
TSH antagonist	**Graves' disease & TED**						IND (2025)
SST3 agonist	**ADPKD**						IND (2025)
Oral GLP-1 nonpeptide	**Obesity**						Candidate Selection (2025)
Oral GIP nonpeptide	**Obesity**						Candidate Selection (2025)
Nonpeptide radiotheranostics	**Multiple oncology indications**						Partner: Radionetics Oncology
SST2 agonist	**Extending lifespan of large and giant breed dogs**						Partner: Loyal

4 New IND-enabling Programs

SST: somatostatin receptor type; ACTH: adrenocorticotropic hormone; PTH: parathyroid hormone; ADPKD: Autosomal dominant polycystic kidney disease.; TSH: thyroid-stimulating hormone; TED: thyroid eye disease; GLP-1: glucagon-like peptide-1 receptor agonists; GIP: gastric inhibitory polypeptide; NDA: New Drug Application; NETs: Neuroendocrine tumors

CRN09682 is Designed to Selectively Target and Deliver Cytotoxic Payloads to SST2-Expressing Tumor Cells



CRN09682
nonpeptide drug conjugate targeting SST2 receptors

MMAE

- Non-cytotoxic when linked
- Highly potent when free

Cleavage Site

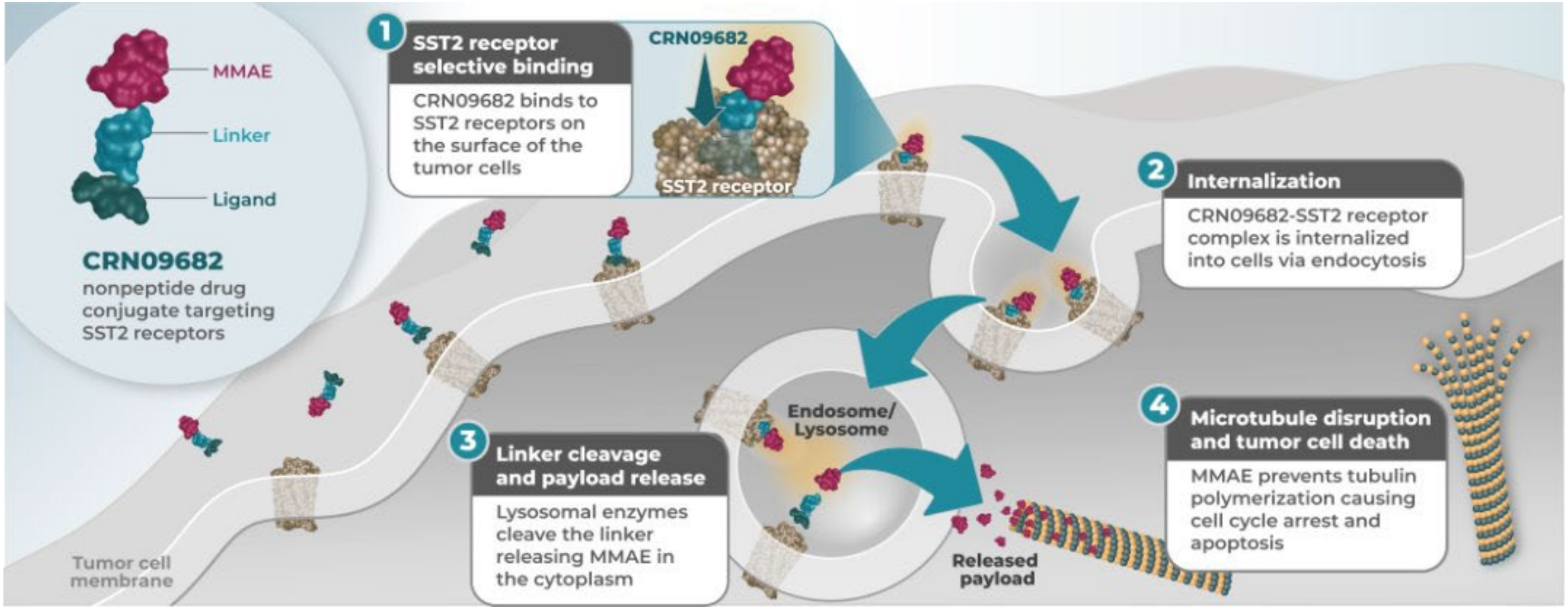
- Stable in plasma
- Cleaved intracellularly

Selective Nonpeptide SST2 Agonist

- High affinity
- High selectivity
- Optimized internalization
- Low molecular weight
- Traditional chemical synthesis

MMAE: monomethyl auristatin E; tubulin inactivator

CRN09682 Is Internalized Into Tumor Cells and Releases MMAE to Trigger Microtubule Disruption and Apoptosis



MMAE: monomethyl auristatin E; tubulin inactivator

Financials

(in millions)	Three months ended September 30,	
	2024	**2023**
Revenues	**$ 0.0**	**$ 0.3**
R&D Expenses	61.9	43.8
G&A Expenses	25.9	15.5
Net Loss	**$(76.8)**	**$(57.5)**

Cash and equivalents totaled **$863 million** as of September 30, 2024, and approximately **$1.4 billion** on a pro forma basis following the public equity offering of common stock in October 2024, projected to fund the company's current operating plan into 2029

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