Crinetics® Pharmaceuticals

February 27, 2025

Fourth Quarter and Full Year 2024 Financial Results and Business Update

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 plans and timelines for the FDA response and the commercial launch of paltusotine, if approved, or the expected regulatory filings in the EU; the potential for any of our ongoing clinical trials to demonstrate safety or efficacy; the plans and timelines for the clinical development of atumelnant, paltusotine, or our drug candidates, including the therapeutic potential and clinical benefits or safety profile thereof; the expected timing of patient enrollment in the Phase 3 program of paltusotine for carcinoid syndrome, the Phase 3 and Phase 2/3 programs of atumelnant in CAH; the expected timing of patient enrollment in additional studies of atumelnant in Cushing's syndrome or our plans or timing for finalizing the protocol for a phase 2/3 study; and expected timing for the initiation of late stage trials or the filing INDs for our PTH antagonist, TSH antagonist, SST3 agonist, or nonpeptide drug conjugate development candidate (CRN09682); the potential benefits of our development candidates in patients across multiple indications or the expected timing of the advancement of those programs or of the progression toward candidate selection for oral GLP-1 nonpeptide and oral GIP nonpeptide; the expected timing of additional research pipeline updates; 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; 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 or political changes 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.

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Demonstrated Execution in 2024 Set Strong Foundation for Transformational 2025

2024

- **Strengthened Balance Sheet to ~$1.4B Cash and Investments***
- **First NDA Accepted for Acromegaly**
- **Positive Clinical Results** (Carcinoid Syndrome, CAH, Cushing's)
- **Progress on Discovery Candidates and Debut of NDC Platform**

2025

- ***Grow Commercial Engine***
  Execute on Clinical Objectives
- ***PDUFA Date September 25, 2025***
  EU Regulatory Filing Expected 1H2025
- ***4 Late-Stage Trials Planned to Initiate***
- ***4 INDs Expected to Be Filed***

Building a Premier, Endocrine-Focused Global Pharma Company to Improve the Lives of Patients

*As of December 31, 2024.

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We Aspire to Make Paltusotine the Standard of Care in Acromegaly and Become the Market Leader

ACTIVATE — SHIFT THE MINDSET

ADOPT — WIN ON EFFICACY

ACCESS — ENSURE ACCESS

ADHERE — DRIVE ADHERENCE THROUGH SUPPORT

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Continued Value Creation with Deep Pipeline of Transformative Drug Candidates

Program	Discovery	IND-Enabling	Phase 1	Phase 2	Phase 3	Registrational	Milestones / Partner
Paltusotine (SST2 agonist)	**Acromegaly**						PDUFA Date (September 2025)
	Carcinoid syndrome						Phase 3 FPI (2Q 2025)
Atumelnant (ACTH antagonist)	**Congenital adrenal hyperplasia**						Phase 3 FPI in Adult, Phase 2b/3 FPI in Pediatric (2025)
	Cushing's disease						Later-Stage Trial FPI (2025/2026)
Nonpeptide drug conjugate (CRN09682)	**NETs and SST2-expressing solid tumors**						IND (Early 2025)
PTH antagonist	**Hyperparathyroidism**						IND (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; IND: Investigational New Drug Application; PDUFA: Prescription Drug User Fee Act
FPI defined as First Patient Randomized

Four INDs Expected in 2025 Driving Next Wave of Innovation

Indication	Neuroendocrine Tumors (NETs)	Hyperparathyroidism	Graves / TED	ADPKD[1]
Target	SST2+ NDC (CRN09682)	PTH antagonist	TSH antagonist	SST3 agonist
Approximate US Patient Population	**140K patients** with SST2+ NETs	**200K incident cases** of primary hyperparathyroidism	**3M+** patients with Graves, many develop TED	**300K+** patients with ADPKD
Potential Indications to Explore	SST2+ Tumors (HR+ Breast, Head & Neck, Thyroid, Metastatic Melanoma, etc.)	Hypercalcemia of Malignancy; Tertiary Hyperparathyroidism	Thyroid Cancer, Goiters, Pretibial Myxedema	Other Ciliopathies

Phase 1 Data Provides Multiple Opportunities for Value Creation

Note: Disease prevalence for US only
[1] Autosomal dominant polycystic kidney disease

Financials

(in millions)	Three months ended December 31,		Full Year	
	2024	2023	2024	2023
Revenues	**$ 0.0**	**$ 0.0**	**$ 1.0**	**$ 4.0**
R&D Expenses	(66.6)	(45.6)	(240.2)	(168.5)
G&A Expenses	(28.2)	(17.1)	(99.7)	(58.1)
Net Loss	**$(80.6)**	**$(60.1)**	**$(298.4)**	**$(214.5)**

Cash and equivalents totaled **$1.4 billion** as of December 31, 2024, projected to fund the company's current operating plan into 2029

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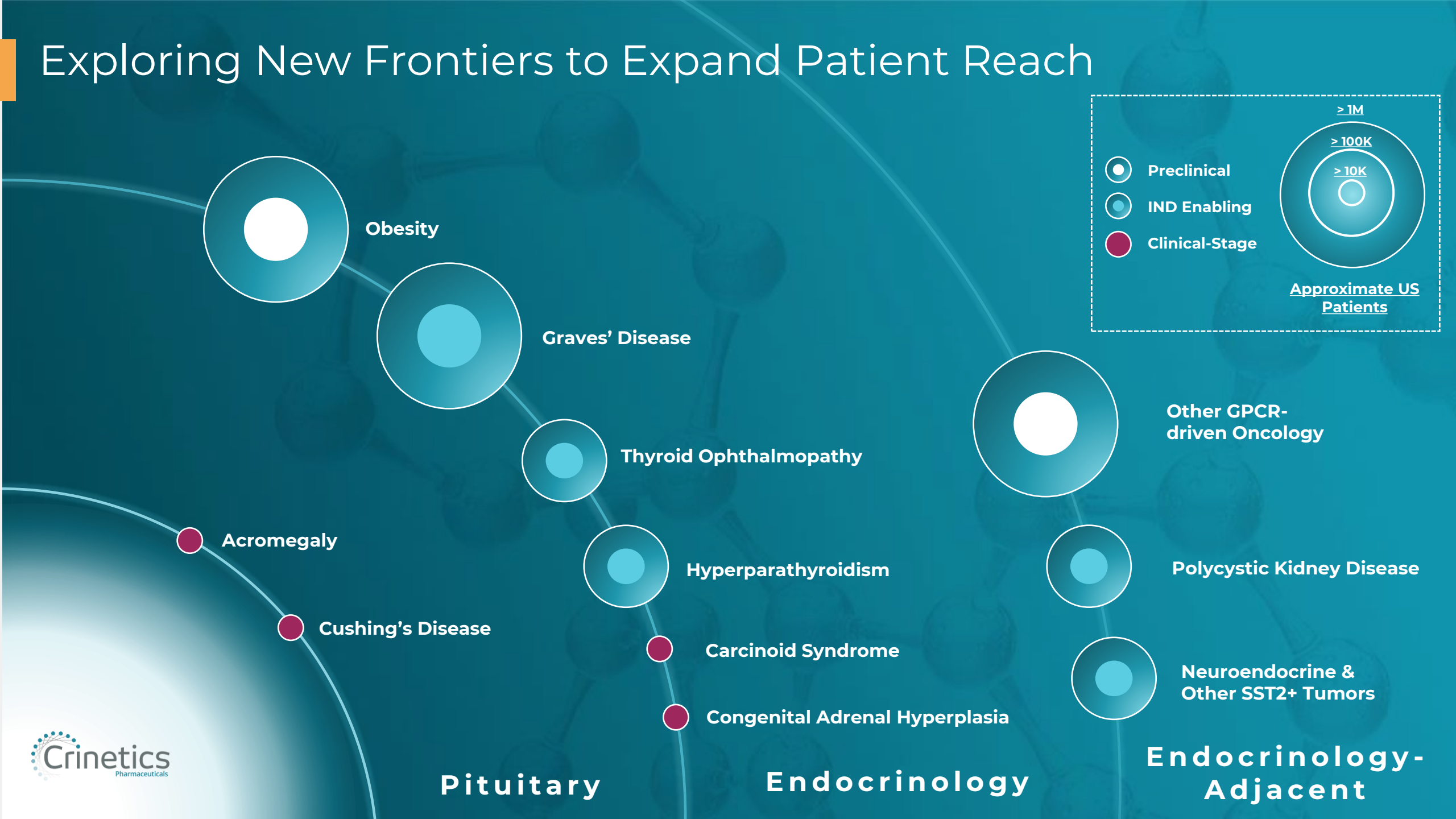
Exploring New Frontiers to Expand Patient Reach



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THANK YOU

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