## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	OF CHANGE	S IN BENE	FICIAL OV	WNERSHIP

OIVID APPROVAL										
OMB Number:	3235-0287									
Estimated average b	urden									
ha	0.5									

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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 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Instruct	tion 10.																			
Name and Address of Reporting Person*     Hall Ashley				2. Issuer Name <b>and</b> Ticker or Trading Symbol Structure Therapeutics Inc. [ GPCR ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner								
	<i></i>													1	Officer	(give title		Other (s		
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 09/18/2024								below) below)  Chief Development Officer								
C/O STRUCTURE THERAPEUTICS INC.					09/	10/2	024													
601 GAT	EWAY BL	VD., SUITE 900	)																	
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SOUTH FRANCI		A	94080											1		•		orting Persor		
FRANCI	.800														Form fi Person		e than	One Repor	ting	
(City)	(S	tate)	(Zip)																	
		Tab	le I - Non	-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	nefici	ally	Owned					
Date					saction 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			4 and Securiti Benefic Owned		es For ially (D) Following (I) (		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)		e:e	Reported Transact (Instr. 3	ion(s)			(Instr. 4)			
Ordinary Shares <sup>(1)</sup> 09/18			09/18	/202	4			A		67,290	) <sup>(2)</sup> A	1	\$0 67,290		,290		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 Of Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year)  Date (Month/Day/Year)  (Month/Day/Year)		ate, T	4. Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		5	s. Price of Derivative Gecurity Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				c	ode	v	(A)	(D)	Date Exercisal:		Expiration Date	Title	Amou or Numb of Share	er						
Share option (right to buy)	\$12.75 <sup>(3)</sup>	09/18/2024			A		82,890		(4)	(	09/17/2034	Ordinary Shares <sup>(1)</sup>	82,89	90	\$0	82,890	0	D		

## **Explanation of Responses:**

- 1. The Ordinary Shares of the Issuer may be represented by American Depositary Shares ("ADSs"). Each ADS represents three Ordinary Shares of the Issuer.
- 2. Represents restricted stock unit award granted under the Issuer's 2023 Equity Incentive Plan.
- 3. The option exercise price per share is equal to the fair market value per Ordinary Share on the grant date based on the trading price of the Issuer's ADSs.
- 4. One-fourth of the shares vest on the first anniversary of September 18, 2024, and the remaining shares shall vest in thirty-six (36) equal monthly installments thereafter.

/s/ Jun Yoon, Attorney-in-Fact 09/19/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.