FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ILLED STATES SECURITIES AND EXCHANGE	COMMISSIO
West-sets D.C. 20540	

OMB APPROVAL								
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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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	fy the affirmativons of Rule 10b																		
Name and Address of Reporting Person* Call Crasma Place					2. Issuer Name and Ticker or Trading Symbol Structure Therapeutics Inc. [GPCR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Coll Crespo Blas				-	Structure incrupeuties me. [of ex]								Director			10% Ow	·		
														V	Officer (below)	(give title		Other (s below)	pecity
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 09/18/2024								Chief Medical Officer					
C/O STRUCTURE THERAPEUTICS INC.				103	09/18/2024														
601 GA1	EWAY BL	VD., SUITE 900)																
(Street)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
SOUTH	~ · · · · · · · · · · · · · · · · · · ·	Α	94080											V	Form fil	ed by One	Repo	rting Person	
FRANCI	SCO				_										Form fil Person		e than	One Report	ing
(City)	(S	tate)	(Zip)																
		Та	ble I - Nor	n-Der	ivativ	/e Se	curities	s Ac	quired,	Dis	posed o	f, or Bo	enefi	cially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution ay/Year) if any		cution Date,		3. Transaction Code (Instr.) 8)			Beneficia	es	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct I Indirect E	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A)		or P	rice	Reported Transacti (Instr. 3 a	on(s)		['	(Instr. 4)	
Ordinary Shares ⁽¹⁾ 09/				09/1	18/202	3/2024			A		90,600 ⁽²⁾ A		\$0	102,600			D		
			Table II -												Dwned			<u> </u>	
				(e.g.,	puts	, cal	ls, warr	ants	, optior	ıs, c	onverti	ble sec	uritie	es)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Yo	ate,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/Da	Date	of Securities		Derivative Security		9. Number derivative Securities Beneficially Owned Following Reported Transaction	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Si			(Instr. 4)	(-/		
Share option (right to buy)	\$12.75 ⁽³⁾	09/18/2024			A		111,000		(4)	(09/17/2034	Ordinary Shares ⁽¹⁾	111	,000	\$0	111,00	00	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.

- * 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.