

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Sofinnova Venture Partners X, L.P.</u>  (Last) (First) (Middle) C/O SOFINNOVA INVESTMENTS, INC. 3000 SAND HILL ROAD, BLDG. 4, SUITE 250  (Street) MENLO PARK CA 94025  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 01/06/2022	3. Issuer Name and Ticker or Trading Symbol <u>CinCor Pharma, Inc. [ CINC ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Series A Preferred Stock	(1)	(1)	Common Stock	3,991,596 <sup>(1)</sup>	(1)	I	By Sofinnova Venture Partners X, L.P. <sup>(2)</sup>
Series B Preferred Stock	(1)	(1)	Common Stock	1,257,353 <sup>(1)</sup>	(1)	I	By Sofinnova Venture Partners X, L.P. <sup>(2)</sup>

1. Name and Address of Reporting Person* <u>Sofinnova Venture Partners X, L.P.</u>  (Last) (First) (Middle) C/O SOFINNOVA INVESTMENTS, INC. 3000 SAND HILL ROAD, BLDG. 4, SUITE 250  (Street) MENLO PARK CA 94025  (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>Katabi Maha</u>  (Last) (First) (Middle)
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C/O SOFINNOVA INVESTMENTS, INC.  
3000 SAND HILL ROAD, BLDG. 4, SUITE 250

(Street)  
MENLO PARK CA 94025

(City) (State) (Zip)

1. Name and Address of Reporting Person\*

Sofinnova Management X, L.L.C.

(Last) (First) (Middle)

C/O SOFINNOVA INVESTMENTS, INC.  
3000 SAND HILL ROAD, BLDG. 4, SUITE 250

(Street)  
MENLO PARK CA 94025

(City) (State) (Zip)

**Explanation of Responses:**

1. Each share of Series A Preferred Stock and Series B Preferred Stock will automatically convert into shares of Common Stock on a 3.4:1 basis immediately prior to the closing of the Issuer's initial public offering and have no expiration date.

2. The shares are directly held by Sofinnova Venture Partners X, L.P. ("SVP X"). Sofinnova Management X, L.L.C. ("SM X") is the general partner of SVP X. Dr. James I. Healy and Dr. Maha Katabi are managing members of SM X and may be deemed to share voting and investment power over the shares held by SVP X. Each of SM X and Dr. Katabi disclaims beneficial ownership of these shares except to the extent of its or her respective pecuniary interest therein. Dr. Healy is a director of the Issuer and files separate Section 16 reports.

**Remarks:**

Sofinnova Venture  
Partners X, L.P., By:  
Sofinnova Management X,  
L.L.C., its general partner, 01/06/2022  
By /s/ Maha Katabi,  
Managing Member  
/s/ Maha Katabi 01/06/2022  
Sofinnova Management X,  
L.L.C., By /s/ Maha 01/06/2022  
Katabi, Managing Member

\*\* 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 5 (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.**