

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).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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 Partners SAS</u> <hr/> (Last) (First) (Middle) 7-11 BOULEVARD HAUSSMANN <hr/> (Street) PARIS IO 75009 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>CinCor Pharma, Inc. [ CINC ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 08/15/2022	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	08/15/2022		P		133,333	A	\$30	4,220,979	I	By Sofinnova Capital IX <sup>(1)</sup>

**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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>Sofinnova Partners SAS</u> <hr/> (Last) (First) (Middle) 7-11 BOULEVARD HAUSSMANN <hr/> (Street) PARIS IO 75009 <hr/> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Sofinnova Capital IX</u> <hr/> (Last) (First) (Middle) 7-11 BOULEVARD HAUSSMANN <hr/> (Street) PARIS IO 75009 <hr/> (City) (State) (Zip)

**Explanation of Responses:**

1. The shares are directly held by Sofinnova Capital IX ("SC IX"). Sofinnova Partners SAS ("Sofinnova Partners") is the management company of SC IX and may be deemed to share voting and investment power over the shares held by SC IX. Sofinnova Partners disclaims beneficial ownership of these shares except to the extent of its pecuniary interest therein.

**Remarks:**

Sofinnova Partners SAS, By  
/s/ Monique Saulnier, 08/17/2022  
Managing Partner

Sofinnova Capital IX, By: 08/17/2022  
Sofinnova Partners SAS, its  
management company, By /s/  
Monique Saulnier, Managing  
Partner

\*\* 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.**