FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF C	HANGES	IN BEN	EFICIAL	OWNERS	HIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* National Person I. National Person II. National Person II. National Person II. National Person III. National Person IIII. National Person III. National Person III. Nation					2. Issuer Name and Ticker or Trading Symbol Denali Therapeutics Inc. [DNLI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Watts Ryan J.				-									X	Direc	ctor		10% (Owner		
														X	Offic belov	er (give title		Other below	(specify	
(Last)	`	,	Middle)					st Trans	saction ((Month	n/Day/Year)				belo	w) Presidei	nt and		'	
C/O DENALI THERAPEUTICS INC.				09/	09/03/2019										rresidei	iit aii	u CEO			
161 OYSTER POINT BLVD.																				
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
SOUTH	SAN		1000										l'	X	Forn	n filed by Or	ne Rei	porting Pers	son	
FRANCISCO CA 94080														Form filed by More than One Reporting						
					-										Pers				ŭ	
(City)	(St	ate) (Zip)																	
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed				
Date			2. Transact Date (Month/Day	Execution Date,		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			and 5) Securities Beneficially Owned Following		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Report Transa (Instr. 3	ction(s)			(Instr. 4)	
Common Stock														12	2,505		D			
Common	Common Stock 09		09/03/2	2019				S ⁽¹⁾		3,734	D	\$18	3(2) 2,498,		98,904		I	See footnote ⁽³⁾		
Common Stock 09/0			09/05/2	2019				S ⁽¹⁾		4,847	D	\$18.0)9 ⁽⁴⁾	2,494,057				See footnote ⁽³⁾		
		Та	ble II -								osed of, convertib				wned					
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution if any			(Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	tion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Der Sec	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Number of Shares							

Explanation of Responses:

- 1. The sales reported by the Reporting Person were effected pursuant to a Rule 10b5-1 trading plan.
- 2. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares purchased ranging from \$18.00 to \$18.04 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 3. The shares are held of record by the Watts Family 2015 Trust dated July 7, 2015, for which the Reporting Person serves as trustee
- 4. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares purchased ranging from \$18.00 to \$18.29 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.

Remarks:

/s/ Tyler Nielsen, by power of 09/05/2019 attorney

** 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.